The UNESCO Courier

A window open on the world

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THE JIGSAW PUZZLE OF DRUGS...

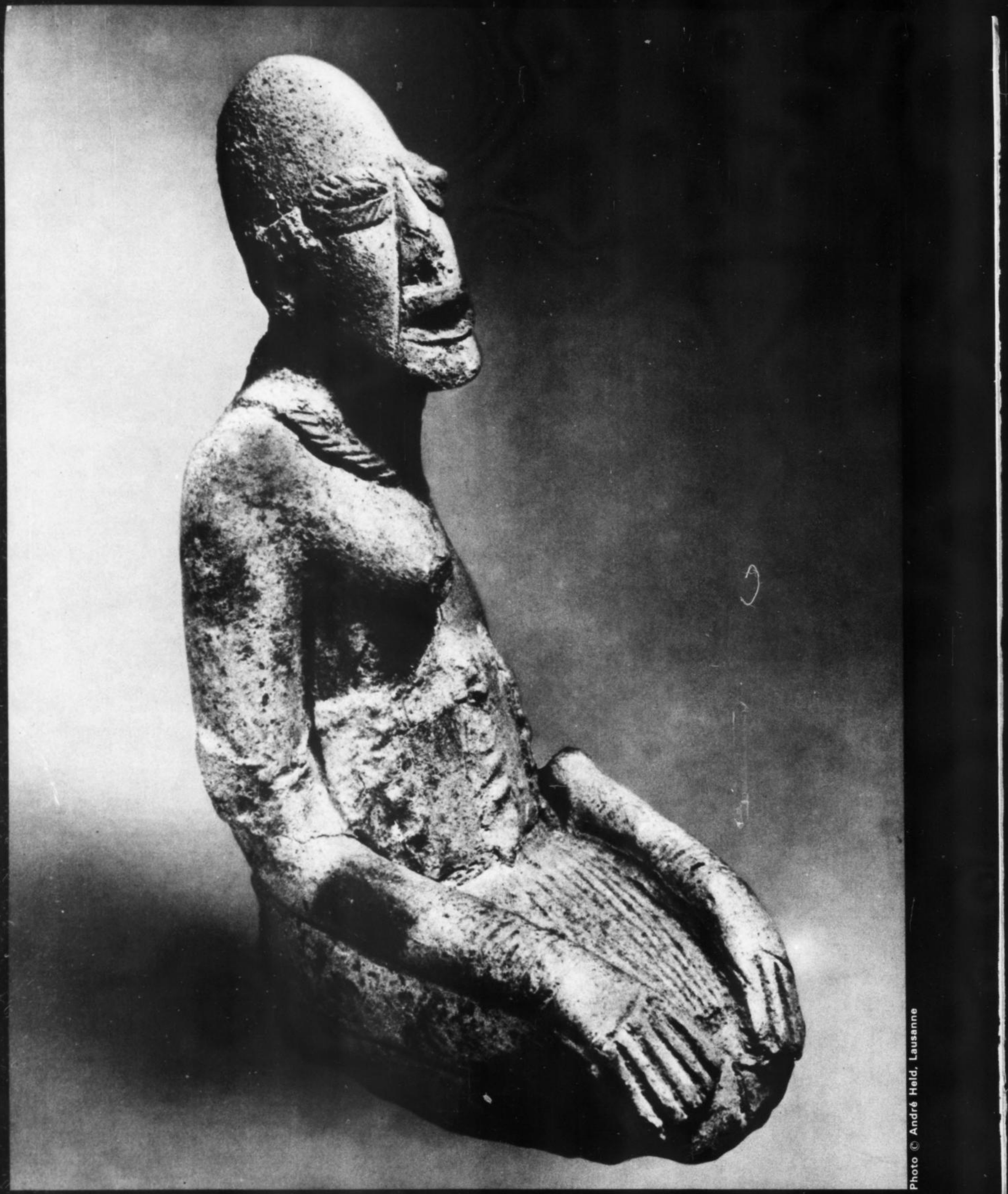

Photo © André Held, Lausanne

TREASURES
OF
WORLD ART

77 *MALI*

Mystery sculpture

This terra-cotta statuette is a mystery. The first of a series of figurines, all feminine, found in the Niger valley between Bamako and Mopti, it is probably the work of a Mandingo sculptor of the late 14th or early 15th century. From the 13th to the 16th century, the Mandingo people controlled a large empire centred on what is now the Republic of Mali. The meaning and purpose of these Mandingo statuettes is not known, but no one can deny that this one has a plaintive melancholy and sad beauty. It is now in the Institut Fondamental d'Afrique Noire, in Dakar (Senegal).

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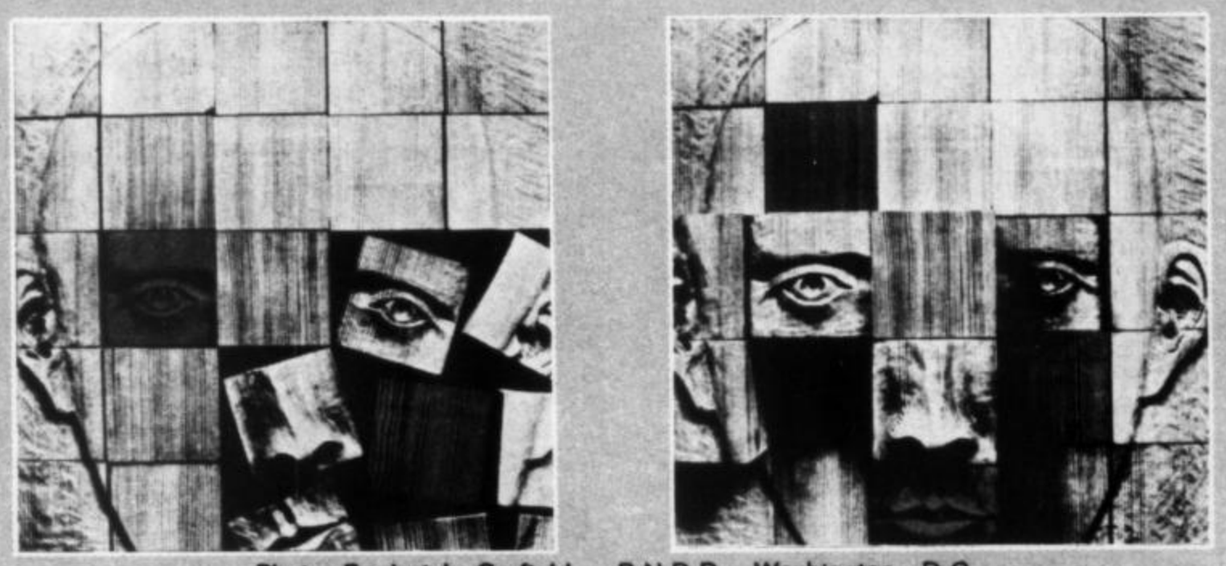


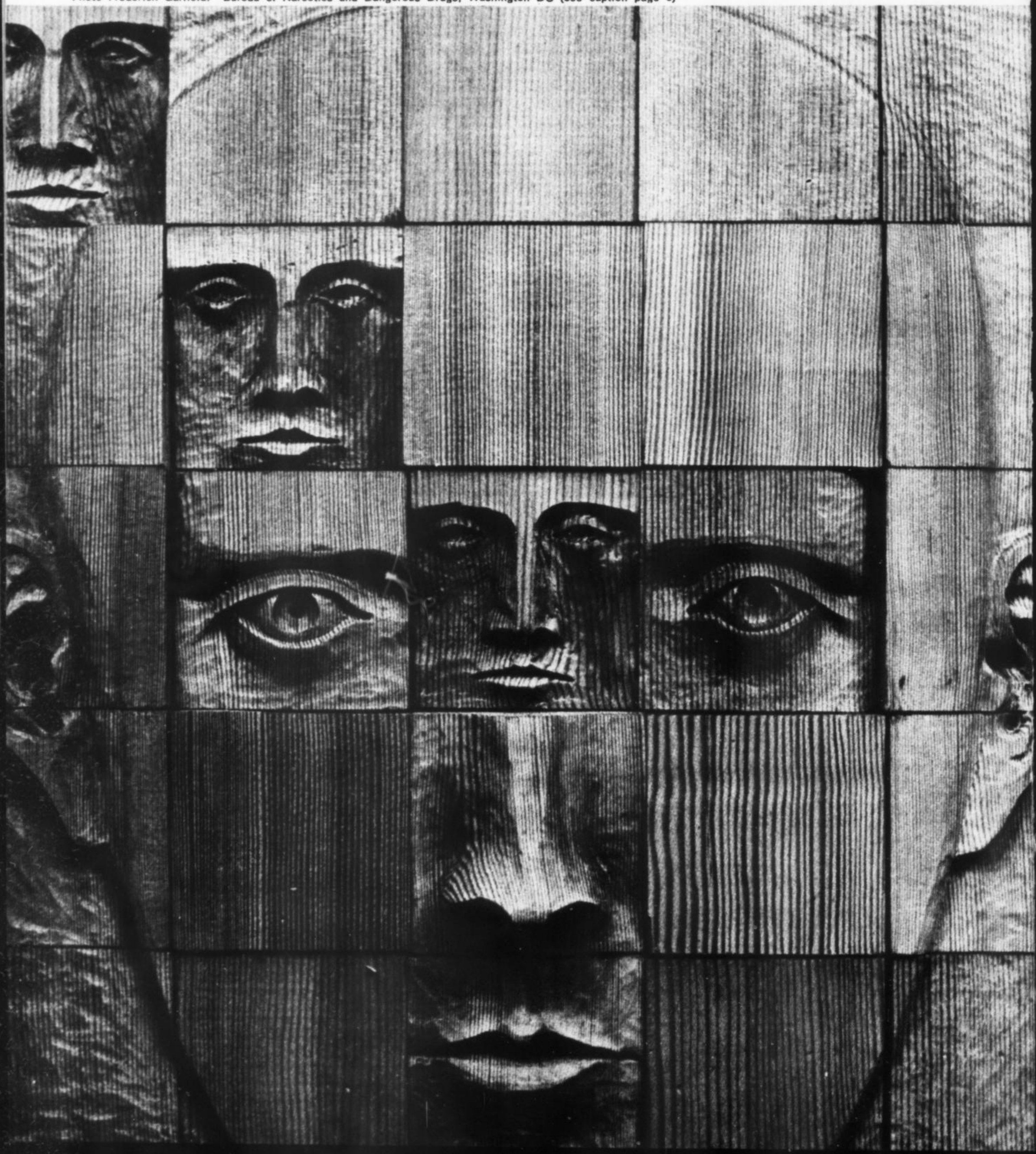
Photo Frederick Garfield - B.N.D.D., Washington, D.C.

THE JIGSAW PUZZLE OF DRUGS

The United Nations and particularly its Commission on Narcotic Drugs have developed a broad international system to control the production and legal use of narcotic drugs and set up operations to check illicit traffic. The World Health Organization has for years carried out international programmes on health aspects of the drug question. Now Unesco has joined this concerted U.N. effort (see box page 21). The illustrations on our front and back covers and on next page are from a booklet on LSD published by the U.S. Bureau of Narcotics and Dangerous Drugs.

This issue of the " Unesco Courier " is published on the occasion of the 25th anniversary of the World Health Organization (which for many years has carried out research on drug dependence and methods of treatment) and more than a quarter of a century of work of the Commission on Narcotic Drugs of the United Nations. The issue examines the growing problem of drugs in the world today and presents the major findings of a Unesco inquiry on the attitudes of different countries to the introduction into the school curriculum of educational programmes on drug abuse and the effectiveness of the types of programmes used.

Photo Frederick Garfield. Bureau of Narcotics and Dangerous Drugs, Washington DC (see caption page 3)



Unesco joins the U.N. world fight against drugs

UNESCO has taken the first steps in a long-term programme designed to combat drug abuse through education, social science research and information. The programme, it is hoped, will contribute to the concerted international effort against the misuse of drugs launched by the U.N. and its Specialized Agencies.

Unesco's approach to the problem was outlined by the Assistant Director-general for Education, Amadou-Mahtar M'Bow, when he addressed teachers, doctors, psychiatrists and social workers from 19 countries at a recent Unesco meeting called to examine the role of education in preventing drug abuse.

"Unesco neither looks upon drugs as a specific problem of youth", he said "nor does it consider that the many serious problems facing youth in the world today all bear a direct relation to drug-taking as such. The use of educational techniques as a weapon against drugs should therefore be aimed at both young people and adults."

The alarming increase in the misuse of drugs, he pointed out, is often attributed to new factors linked to present-day development in certain societies: the urban explosion, growing acceptance of "consumer society" values, the glorification of violence, social inequalities of all kinds, the generation gap and the malaise affecting certain sectors of the youth population.

Unesco's inquiry showed that the problem of drug abuse has increased ominously during the past few years. Growing cause for concern is seen in the availability of a wide variety of drugs and changes in the pattern of drug-taking.

From being an escape route for certain adults, it has spread alarmingly to young people in all levels of society; from being the practice of a loner it has become a group activity, from cases of addiction to a single drug, it has become increasingly a problem of multiple addiction, with a switch evident from minor drugs to major ones or the use of several drugs at once.

Unesco's inquiry reveals two particularly disturbing trends: the "epidemic" spread of the drug habit and the growing hold it has taken on younger persons, even children.

Thus, surveys at the University of Maryland (U.S.A.) showed that 15 per cent of students used marijuana in 1967, about 24 per cent in 1968 and about 36 per cent in 1969. In the U.K. in 1964, only 40 known drug addicts were under 20 years old; in 1966, they numbered 329, most of them heroin addicts. In France, between 1946 and 1949, a census of drug consumers included only one aged under 20; in 1971, 90 per cent of nearly 1,900 consumers arrested were under 25. In Costa Rica, ten years ago, marijuana was an adult habit; now it has spread to 14 and 15 year-olds.

All the countries studied allow the production of drugs only for medical purposes and most forbid cultivation of the opium poppy, the coca bush and the cannabis plant. Use and possession of drugs are also largely prohibited, but not uniformly.

Penalties for drug offences vary. Drug traffickers risk up to ten years' imprisonment in Britain, France and the Federal Republic of Germany, six years in Denmark and Brazil, five years in Jamaica and three years in Costa Rica. In the U.S. a drug pedlar may be jailed for life. Iran and Nigeria provide the death penalty for drug producers.

Drug abusers are punished in most of the countries covered by the Unesco inquiry, although it notes that "infliction of penalties on drug users has not only proved everywhere to be ineffective... it has even aggravated the problem."

We should not overlook the fact, Unesco states in its report, that in present-day societies, adults use and abuse various "drugs" and especially pleasure-producing substances or those which relieve anxieties due to the tensions inherent in modern life. Coffee, tobacco and alcohol are seen as daily essentials, we take amphetamines to stay awake and barbiturates to go to sleep, as well as various "shock-absorbers" against the stress of daily life.

The latest report, in March 1973, of the U.S. Commission on Marijuana and Drug Abuse termed chronic alcoholism "without question the most serious drug problem in the United States today." While calling for severe punishment of drug traffickers, it urged greater emphasis on treatment rather than penalties for drug abusers and called for a new approach to the whole problem. (See box page 20.)

As WHO reported in a pamphlet entitled "Youth and Drugs", just published in Geneva, "The responses of society to the non-medical use of dependence-producing drugs will depend on how its individual members and institutions perceive the problems associated with such use. These perceptions and subsequent responses will also be much influenced by prevailing attitudes and beliefs about (1) why people take drugs; (2) the immediate and delayed effects of doing so; and (3) certain aspects of the society's broad value system."

A Working Group was recently convened by the WHO Regional Office for Europe to explore "Measures for the Prevention and Control of Drug Abuse and Dependence." Referring to the educational approach to the problem, the Working Group noted: "The risks from ill-considered health education programmes for school-children may outweigh the benefits if too sensational an approach glamorizes, and increases morbid interest in the subject. Programmes should be judged by their effects and not by the intentions of their sponsors."

This is, in effect, what Unesco set out to do in the international inquiry it carried out on the prevention of drug abuse by education and information. ■

To teach or not to teach?

Should education about drugs be introduced into the curriculum? Results of a Unesco international inquiry

IN 1971 and 1972 Unesco carried out an international inquiry to find out what role education should play and actually is playing to combat the growing problem of drug abuse today.

The inquiry covered fourteen countries, two in Asia (India, Iran), two in Africa (Nigeria, Senegal), six in Europe (Denmark, France, Fed. Rep. of Germany, Sweden, Switzerland, U.K.), and four in the Americas (Brazil, Costa Rica, Jamaica, U.S.A.).

The Unesco inquiry was not limited to education in schools; the broad questionnaire sent to Unesco Member States included questions on the role of the information media and the social sciences.

Unesco has just issued two preliminary reports which contain an analysis of the replies received, the first entitled "Patterns of Drug-taking and Official Policies"; the second, "Prevention of Drug Abuse by Education and the Mass Media". The articles below and on page 12 are based on the findings of the latter study. The results of an inquiry into the controversial question of the harmfulness of cannabis based on the first-mentioned study are presented on page 23.

OF the 14 countries covered by Unesco's international inquiry, nine (Brazil, Denmark, the Federal Republic of Germany, India, Jamaica, Sweden, Switzerland, the United Kingdom and the United States) favour a drugs education policy in schools, universities and out-of-school education. All these countries have initiated some form of drugs education, and India is preparing a large-scale project.

Among the five other countries, two (Nigeria and Senegal) expressed no opinion on the value of drugs education. Costa Rica indicated that no action had been undertaken apart from the distribution of information leaflets in secondary schools and that no particular measures are envisaged by the Ministry of Education. The Costa Rican Ministry of Public Health, however, replied that it was in favour of a policy of drugs education within the school system and elsewhere.

The remaining countries (Iran and France) are opposed to introducing specific instruction on the abuse and characteristics of the different drugs into school programmes.

Iran's position is that "in order not to attract the attention of young people, and in view of existing social conditions, it is wiser for the moment not to include in school programmes an open campaign against the use of drugs. In many of the remoter parts of Iran even the names of heroin and morphine are, fortunately, still unknown. The mere fact of talking about them could provoke among the young an urge to indulge in drugs, if only for fun or out of curiosity." (See also footnote page 14.)

The French attitude to the question is less clear-cut, but reflects the same fear of talking too much about drugs and thus inciting young people to experiment. A 1971, Ministry of Education circular on "the fight against drug addiction in institutions of higher education and in schools" urges the heads of such establishments to show "vigilance and discernment". It calls for preventive action, help for drug-addicts and protection of the school against drug-pushers coupled with the general policy of keeping school doctors, parents and teachers informed.

For the time being no specific education programme is envisaged in France. Courses on drugs and the distribution of explanatory leaflets are both considered undesirable and direct action is advised only when absolutely essential. Excessive publicity, it is felt, might well encourage the spread of drug-taking.

However, the French reply mentions a project for civic, health and social education intended for third and fourth year secondary pupils which would include some information on drugs. It is feared that a course entirely devoted to drugs might have harmful effects.

Being autonomous, French universities are free to introduce lectures on drug abuse, though "this is a problem which preoccupies students far less than is generally believed". But education for teachers and opinion-makers is foreseen.

Countries which favour education against drug abuse realize that young people, through their own grapevines, get hold of a great deal of information, some of which is true, some partially true and some false. Surveys show that an increasing number of young people have experimented with various drugs and that an even greater number are exposed to the temptation to experiment.

Yet agreement in principle to the need for education is always coupled with reservations due to the fear of

Photo © from "Elementary Grammar of the Image" by Albert Plécy, Editions Estienne, Paris

saying too much, of saying it badly, of stimulating an already active interest in drugs among young people by ill-considered remarks from teachers who themselves are not well-informed on the problem. All these reservations concern what methods to use and their effectiveness which is extremely difficult to assess since so far no evaluation of programmes and different types of action has been made.

Unesco's inquiry shows that countries which favour education for drug prevention tend to adopt two main approaches: to put the young on their guard against drugs, and to eliminate the aura of drama that surrounds drugs.

In support of the first approach it is argued that young people receive one-sided information on drugs from unofficial sources (fellow-students, magazines, drug-addicts, etc.) which stress the pleasures of drug-taking while saying almost nothing about its dangers. The young must therefore be told about the risks of drug abuse if a change of attitude is to be brought about.

The second approach sets out to dispel the magic aura, the romantic and fascinating aspect of drugs, which may well account for the attraction they hold for the younger generation. Much of the drama would be taken out of drug education, and thus out of drugs them-

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selves, if it formed an integral part of the school curriculum, given as part of a health instruction class sandwiched between classes on mathematics and languages.

A warning taken from a United Kingdom health instruction manual stresses that the subject of drug-taking "should not be handled in such a way as to lend it glamour or to encourage its concealment... It should be discussed in the proper context as an aspect of health education." This view is shared by the United States, the Federal Republic of Germany, Denmark and Sweden.

All these countries emphasize the need for objectivity in presenting information to students and to young people generally. Denmark, for instance, maintains that the first principle is that "all education should be as truthful as possible."

A manual for teachers published in the United States quotes the following example: "If 20 per cent of the students in a classroom of 50 have used a drug, there are at least 10 students carefully measuring the teacher's words against empirical knowledge. At least 30 students will know the 10 as users and be briefed by them. With 40 of the audience of 50 in a good position to judge the accuracy of a teacher's statement about a drug he has probably never tried, any discrepancies will be quickly noted and used to breed distrust of the total presentation."

And the manual adds that "the 'why it's dangerous to use drugs' approach is likely to make any teenagers feel that if they haven't tried drugs they're missing something."

In almost all countries where educational campaigns have either been launched or are in preparation the initiative has come from government organizations operating on a national scale.

Thus, in the United States, the Drug Abuse Education Act of 1970 aims "to encourage the development of new and improved curricula on the problems of drug abuse; to demonstrate the use of such curricula in model educational programmes and to evaluate their effectiveness; to disseminate curricular materials and significant information for use in educational programmes throughout the nation; to provide training programmes for teachers, counsellors, law enforcement officials, and other public service and community leaders; and to offer community education programmes for parents and others, on drug abuse problems."

The Act also sets out in detail the different fields of application of this education policy. The directives and plan of action communicated by the United States originate from federal agencies. The National Clearing House for Mental Health Information, a branch of the National Institute of Public Health, is the main agency for the assembly and dissemination of

Experiments

● UNITED STATES: A broad range of comprehensive educational programmes against drug abuse have been drawn up in the U.S.A. Only a small sampling is given here (see also article page 13). Among the countries which replied to Unesco's Inquiry, only the U.S. reported action at the pre-school level. Most of the programmes for the very young begin in the kindergarten; for example, a painting album, such as "Katy's Colouring Book about Drugs and Health" (published by the Bureau of Narcotics and Dangerous Drugs, Guide for teachers and parents), is used in discussions on the place of medicines in the life of children. The main theme is: only sick people need medicines.

Another programme of the same type suggests that teachers should.

■ get children into the habit of asking parents or other responsible adults before eating or drinking anything new;

■ make them aware that some everyday items may be harmful if used improperly.

The methods recommended in the "model" lesson are active methods: games, such as "We Ask First"; or dramatic play, such as "The Day Baby Got Sick"; the making of individual safety scrapbooks which each child shows to his parents for their comments and evaluation. Transparent prints and slides are also available.

Warnings against the abuse of medicaments and drugs are generally given in a full course on physical health and mental hygiene. Children should learn the value of good health and "what their healthy bodies can do so they will appreciate them".

A large number of comprehensive programmes have been drawn up by different States:

■ three series of programmes go from kindergarten to senior high school inclusive;

■ two others are intended for grades 4, 5, and 6, and for grades 6 to 12.

Most of the programmes include a statement of the basic orientations and of the psychological and moral principles underlying them which can be summed up in three main points:

— Instruction on drugs should hinge naturally on some school subject (according to the level, on health education, biology, or the social sciences).

— Health education should stimulate the young to have more positive motivations with regard to themselves (a sense of physical and mental health), to others, and to society as a whole (the urge to play a social role, to take part in the life of the community and assume responsibility towards it).

— Confronted with numerous sources of information, young people should learn to sort out for themselves the data on a given subject (in this instance drugs), to select the pertinent information and make a decision. Particular emphasis should be given to decision-making.

The programmes also include plans for model lessons that cover objectives, time-tables, themes (with bibliographical references) and available audio-visual aids (filmstrips, slides, films, pamphlets and folders, posters, etc.).

A great deal of audio-visual material is available including at least seven 16 mm films suitable for junior and senior high schools: "Are drugs the answer?", "A day in the death of Danny B.", "Drugs and the nervous system" and "Hooked", among other titles.

● JAMAICA undertook a variety of activities during its "Beware of Drugs" campaign, in which films, lectures and leaflets were all used. Most of the material came from the United States. Leaflets distributed by the Regional Centre for Technical Aid and the Alliance for Progress include: "Narcotics: Some Questions and Answers", "Merijuana: Some Questions and Answers", "The Up and Down Drugs: Amphetamines and Barbiturates", "Barbiturates as Addicting Drugs", "LSD: Questions Concerning Students and the Abuse of Drugs", "Living Death: the Truth About Drug Addiction", "An American Father Speaks Frankly about Marijuana".

information concerning pedagogical experiments undertaken at the local or State level.

A number of courses are selected, reproduced and sent on request to schools and teachers. They carry no recommendation as to their adoption but are distributed as documentary material to help schools undertake or improve their general programme.

The National Clearing House also circulates for the use of teachers, research findings, bibliographies, film listings and information leaflets on the different drugs, as well as audio-visual aids to illustrate the courses. More particularly, the Social Action Office for Drug Abuse Prevention provides up-to-date information on available educational programmes, their approach and their different fields of application.

The Bureau of Narcotics and Dangerous Drugs of the Federal Department of Justice is also highly active in the field of prevention but is less directly specialized in educational matters. It has, nevertheless, prepared a number of programmes for study courses.

In the Federal Republic of Germany prevention programmes are closely supervised by the Federal Ministry of Youth, the Family and Health. A number of inter-ministerial working groups are also active in the fight against the misuse of drugs and the protection of youth.

In addition, the Central Federal Office for Health Information has launched an extensive campaign of prevention through education and information. Because of the dearth of qualified instructors, however, the inclusion of teaching on drugs in school curricula has been postponed. But as a start, the Office is contacting those who are well placed to pass on their knowledge to a large public, particularly teachers, instructors, educationists, youth movement leaders, social workers and student representatives on school administration councils. It is planned to increase the number of model seminars to provide rapid instruction for all those engaged in education.

The German Head Office for Combatting the Dangers of Drug Addiction co-ordinates at the federal level all activities, including the publication and free distribution of written material, films and slides specially prepared for schools, youth movement leaders, apprentices, etc.

In Switzerland, prevention programmes are the responsibility of the Cantonal educational authorities. Several Cantons have taken steps to introduce preventive educational programmes, often as part of general health instruction, and to co-ordinate the activities of public and private organizations. A large travelling exhibition, intended for schoolchildren as well as the general public, is now visiting towns throughout the country. (See also page 28.)

In Denmark, the United Kingdom and

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in six countries

● **COSTA RICA also draws largely on the same United States material translated into Spanish. The Costa Rican Ministry of Public Health also published, in 1970, a comprehensive leaflet entitled "Marijuana, the Poison of Youth".**

In general, the leaflets and colour folders are well presented and sum up the main points about a particular drug: definition and characteristics, physical and psychical effects, medical use, abuse and consequences, physiological and psychical dependence, and, where appropriate, the results of research and the addresses of information or treatment centres. The information given is objective and essentially factual.

● **THE UNITED KINGDOM: Like many other countries, including the Fed. Rep. of Germany, the United Kingdom has not formulated systematic programmes at this level. The only educational material communicated by the U.K. is a pamphlet for teachers to accompany a 23-minute educational film in colour, entitled "One Way Ticket".**

This is a real-life story, adapted and designed for education on the use of drugs in the modern world. Intended for 14 to 17 year-olds and based on the case histories of several young people living in an industrial town, it provides a starting-point for a discussion on the principal effects of cannabis, LSD, amphetamines, barbiturates and, to a lesser degree, heroin.

The accompanying pamphlet includes a guide for debate on the film and on factors conducive to drug-taking and dependence. It also describes a number of actual cases and makes suggestions for further study.

● **SWEDEN: In Sweden, education on alcohol and other drugs was provided for in schools as long ago as 1928. In fact, these subjects were dealt with only to the extent that time permitted and according to the interest of the individual teacher.**

In 1962, the Swedish Parliament laid down new directives on the teaching of different subjects. The only reference to alcohol, drugs and tobacco was under intermediate level science in the Grundskola (the Grundskola in Sweden provides nine years compulsory education from 7 to 16, at elementary, intermediate and higher levels).

Education on alcohol, tobacco and other drugs occupies a prominent place in the new programmes adopted in 1970, the aim being to give students "an education that enables them to make independent and responsible decisions, both in principle and in concrete choices, regarding their own use of things."

At the elementary level children can be taught about tobacco, alcohol and, if such questions are in the news, the use of solvents and drugs, during discussions regarding health, bodily functions, social behaviour and habits.

"Using well-informed and detailed arguments, the school should point out the positive value of total abstinence from alcohol and tobacco first of all during the period of growth. It should also be made clear that all use of drugs not prescribed by a doctor spells danger and is contrary to the law," says a study published by Sweden's National Board of Education.

At the intermediate and higher levels, it says, education should be directed towards fields of interest in sociology and the natural sciences. At the higher level opportunities should be found to discuss behaviour and the results of scientific surveys on this subject as well as the role of publicity in shaping attitudes.

Moreover, it is important that the school should co-operate closely with parents and with representatives of the various health institutions and agencies so as to reinforce what has been learned at school.

● **DENMARK reports the use of several well-designed programmes in schools. Education on drug abuse forms part of the health, and later, the biology programme.**

Educational television broadcasts have also been devoted to the subject. A network of consultants and specialized teachers has been organized so that information given out may be co-ordinated. ■

Sweden, the education programmes are drawn up under the auspices of the Ministry of Education, within the framework either of a commission studying the drug problem in general (in Denmark, a commission on the abuse of drugs by the young; in Sweden, a committee for protection against drug abuse) or of a special council for health education (in the United Kingdom, the Health Education Council, set up in 1968).

In India, the National Council of Educational Research and Training is preparing an education project for young people designed to prevent drug abuse, particularly in secondary schools, teacher-training schools and centres and universities. It plans to include an appropriate lesson in textbooks when they are next revised.

In Costa Rica, the Ministry of Public Health is contemplating an education programme to be drawn up by the Ministry of National Education. The two ministries are to study whether or not to include a special programme in school and college programmes, and how to prepare teachers and parents to understand and accept this teaching.

In Jamaica and Brazil, the sporadic action so far taken in regard to school and out-of-school drugs education has not been directly initiated by the Government.

Denmark, the Fed. Rep. of Germany, Sweden, U.K. and U.S.A. all subscribe to two educational principles. They reject the so-called traditional tactics of intimidation; their view is that from an educational point of view, stressing *only* the dangers of drugs serves no useful purpose, because many teenagers feel it is natural to take risks and are rarely likely to feel themselves directly affected by the dangers described.

They also advocate the presentation of facts, not of the value judgements of an authoritarian educational system. Teenagers are by nature often rebellious, and clumsily imposed prohibitions can incite them to defiance.

Nevertheless, these countries fall into two distinct groupings. There are

Photo Gilles Peress © Magnum

those who believe in the effectiveness of drugs education and who have produced programmes and started distributing them on a nation-wide scale (primarily U.S.A., followed, to a lesser degree, by Denmark and Sweden).

The other group, including the U.K., for example, feels that the drug problem has not yet affected a sufficient section of its population to justify prolonged and systematic drugs education, which might risk attracting the attention of young people; the Federal Republic of Germany is waiting for the results of regional surveys and sociological studies. In practice both countries end up with the same policy.

Several countries have reservations

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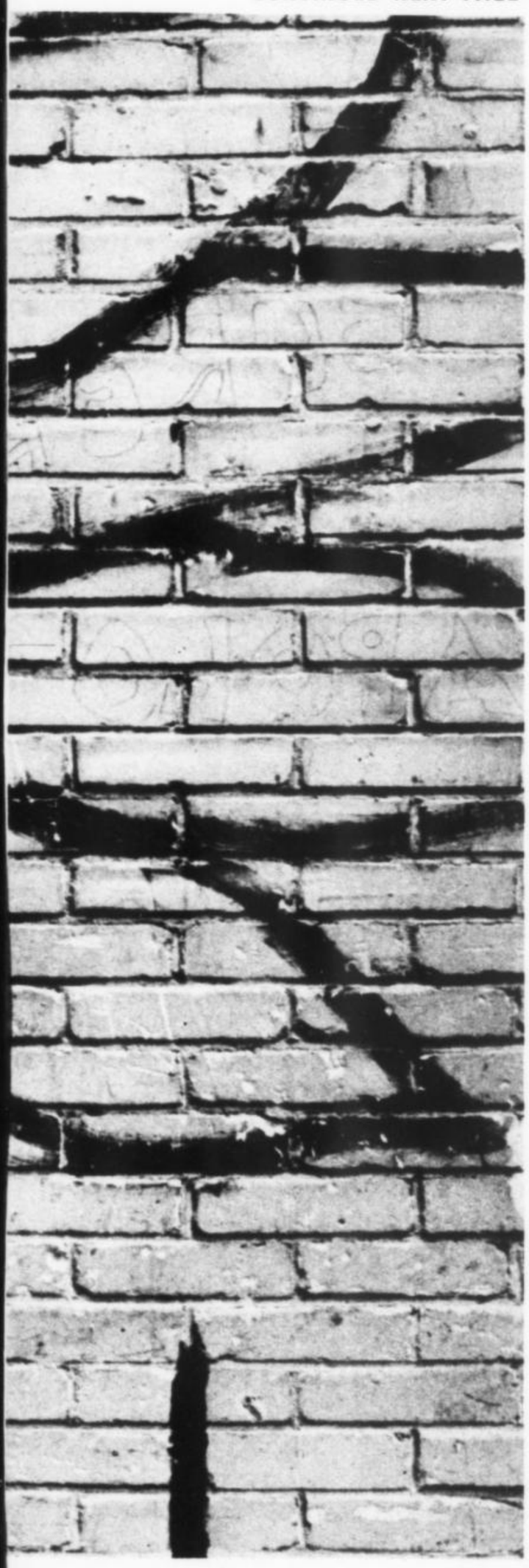

The don'ts of drug education

'Only education enjoys the dubious privilege of having the power to make matters worse...'

by George Birdwood

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CAN education succeed—where so many other measures have failed—in preventing the spread of adolescent drug abuse? This is the first question we must ask ourselves before assuming too readily that drugs education in schools is the panacea for which society has been searching. The second problem is more serious. Can we be sure that our intervention will not do more harm than good?

Nobody knows the answers. There has apparently never been a predominantly teens and twenties epidemic of drug abuse, and certainly not on anything like the present scale. So there is no social experience to guide us. Nor do we have any convincing evidence of a drugs educational programme that has succeeded in exerting a preventive influence.

Moreover, experience in related fields suggests the need for caution. Supposedly preventive education about sex in Great Britain and about alcohol in Sweden, for example, seems to have done as much to popularize these "products" as to improve the balance between use an abuse.

Let us be clear from the start that there could be more potential for positive harm here than with the other measures so far adopted.

Psychiatric or other medical treatment may not cure many addicts, but it does not—a few rogue doctors apart—create new ones. Much the same is true of other types of expert intervention, such as epidemiological studies and pharmacological research. They have little power to make matters worse.

Only education enjoys that dubious privilege. Yet it is currently enjoying a great vogue in several countries.

Some of these programmes look to me suspiciously like sets of instructions. Whether they will have the hoped-for preventive action or merely serve as publicity for the drugs cult is very much an open question. In effect, teachers are the latest recruits (or perhaps unwilling conscripts) to the growing army of experts that society is sending into the front line to wrestle with the drugs problem on its behalf.

Personally, I am doubtful if this is a battle that the experts can win, and I am certain that the front line is not the place for them—but more of that later. First, we must take a look at the case for drugs education, and then at the ways in which it might best be carried out. This is an essential

CONTINUED PAGE 31

GEORGE BIRDWOOD, *British doctor and medical editor, is honorary chairman of the London Region of the Association for the Prevention of Addiction. In this capacity he has given many talks to schoolchildren on the question of drugs.* *His article is taken from "Drugs and Society" (nº 4, Vol. I, 1972) published monthly and © by Macmillan Journals Ltd., London.*

TO TEACH OR NOT TO TEACH?
(Continued)

about systematic drugs education.

In the Fed. Rep. of Germany, owing to the shortage of trained personnel and because research is still going on, no action has been prescribed at the federal level, though some recommendations have been made. The number of hours of drugs education, its place in the programme and the choice of methods are left to the local authorities to decide. Meanwhile, the content of this education is being examined, and a number of guiding principles for teachers can be singled out:

- Emphasize the risks of the unknown (the exact effect of a drug cannot be foreseen).
- Tell pupils not only about the physiological effects of drugs, but also about the way they interfere with brain function in a way comparable to the processes that occur in the mentally sick.
- Do not ostracize the sub-cultures. Point out that only a small percentage of young people take drugs.
- Do not allow yourself to be shocked or speak of drug-taking as being unquestionably a form of depravity.

Point out that:

- Anyone who takes drugs is evading life; he is a daydreamer, incapable of coming to grips with the realities of life. He is not really living, just being manipulated by drugs.
- Drugs do not broaden consciousness, but force it to function abnormally (this is particularly serious at a time of physical and mental growth).

In the U.K., freedom of choice is left to the schools and local education authorities. In fact, action has only been taken in areas where drugs pose a specific problem. Many schools and education authorities appear to have reservations about systematic drugs education since they are afraid of stimulating students' interest and encouraging experimentation.

They have even stronger reservations concerning the drawbacks of using methods such as highly emotional films and television programmes, or lurid accounts of their experiences by former drug-addicts.

In general, it is recommended that precise details of drugs should not be given (how they are taken, their appearance, their effects); the teenager should be helped to use his own judgement. Above all, care should be taken not to exaggerate, as drug-addicts do, the personal and social importance of drugs and related problems. It is better to show that drugs are a very poor substitute for a real commitment to life. ■

The mass media

Are the mass media doing more harm than good in dramatizing the drug question?

ALL 14 countries studied during Unesco's inquiry report that the information media—radio, television, films and press—have at various times taken the initiative in publicizing the drug problem.

None of the countries is radically opposed to using the mass media for campaigns against drug abuse, whereas, in the case of education, their attitudes were less clear-cut.

But many are critical of the manner in which the mass media have hitherto dealt with the subject. By dramatizing and exaggerating the problem, they say, coverage has often merely succeeded in reinforcing stereotyped public views on drug abuse.

Some countries, such as Costa Rica, point out that the information media have on occasions launched sensationalist campaigns, completely unscientific in approach, which can hardly be termed preventive. Switzerland stresses the need for utmost caution in the use of the mass media and in the popularization of knowledge about the drug problem.

Two countries, France and the Federal Republic of Germany, go so far as to hold the mass media (in particular the popular press) partly responsible for the sudden spread of the drug problem, arguing that total silence would have been preferable to spreading sensational and often inaccurate news.

Many nation-wide information campaigns have been organized by governments, with the mass media operating under their control, so as to counteract the often negative effects of earlier unofficial campaigns.

All countries, it seems, agree that the mass media have played an important role in the popularization of knowledge about narcotics. But they are divided on whether this action really adds up to prevention of drug abuse. They consider that concerted research is needed to discover the real effect of information given out by the mass media and what dangers should be avoided.

France, for example, points out that nothing was done through the mass media until August 1971, since no problem had yet arisen, and it was felt in these circumstances that information would have done more harm than good. "By a series of haphazard campaigns," says the French report, "the press has made the public aware of the problem without giving it the real facts."

Differences of opinion arise over methods of using the mass media. Should newspaper and magazine editors, and film, radio and television producers be allowed complete freedom of action? Should seminars be organized to alert them to the need for a more scientific approach to the drug problem? Should a strategy be drawn up at government level and applied under government control?

Jamaica, Nigeria and Senegal gave no direct answer to these questions, but all other countries favour government action based, where possible, on scientific research. They feel that an information strategy should:

- define clear objectives based on a selected number of principles;
- work out a general plan of campaign and co-ordinate action by all government departments involved;
- draw up a precise information plan for each branch of the media.

The French reply warns against the harmful effects of "bad information", or rather of a policy of haphazard information. In the words of a French Ministry of Public Health report, the basic aim is "to convince everyone directly or indirectly affected by the problem of the dangers of drugs that

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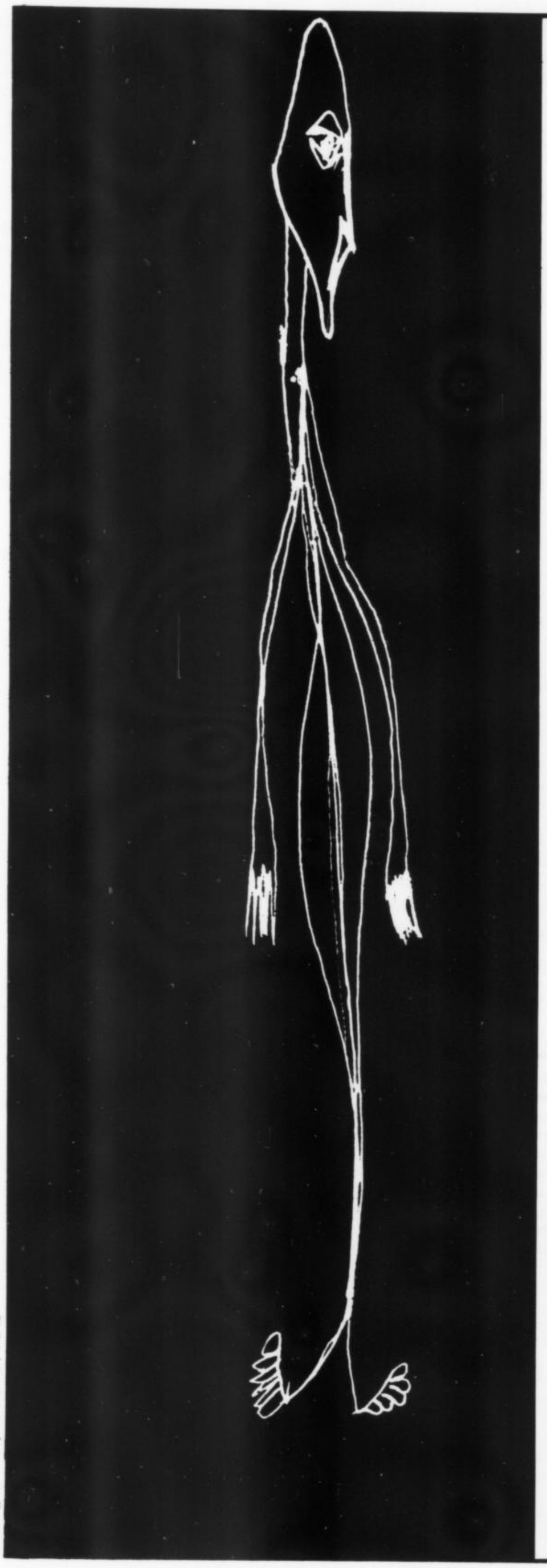
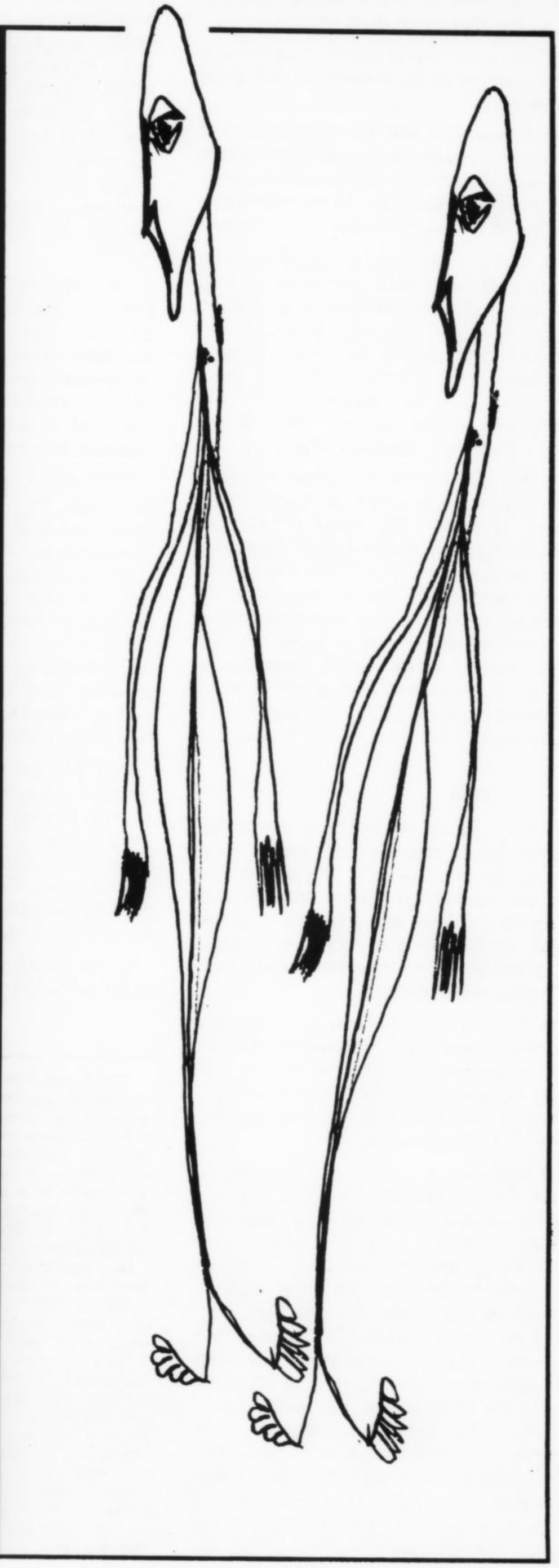
: a two-edged sword





Drawing © François Koffler, Paris

The need for a new strategy

all can play an active part in preventing the spread of drug abuse."

The same report points to a number of dangers to be avoided in achieving this aim:

● Information will be ineffective if it fails to reach the public for which it was intended. Appropriate channels should be selected and information tailored for each section of the public.

● If improperly presented, information can stimulate rather than prevent drug abuse. Detailed explanations of ways and means of obtaining drugs, incomplete descriptions of their harmful effects, over-dramatization and inaccuracies, undue emphasis on the pleasure to be derived from drugs, can all have a negative effect.

The question of the pleasure given by drugs needs to be approached with special care. To deny it outright obviously reduces credibility, especially in the eyes of a young and often well-informed public. To emphasize it, on the other hand, invites experimentation. "The best solution is to point out that the use of drugs rapidly becomes a need to relieve the anguish at their absence rather than a search for pleasure."

THE myth of the intellectual stimulation claimed for drugs must also be discredited. The social and group aspects of certain drugs should be played down and it should be pointed out instead that real drug addicts, heroin-takers for example, never form lasting communities.

● Information can harden society's attitude towards drug-takers; it can have traumatic effects on parents and lead to the total rejection of the young addict who will then have no further hope of being cured.

● Information can fail in its dissuasive task if it establishes a false relationship between the problem of drugs and other problems, lumping it together, for example, with alcoholism; drugs are a new phenomenon and social defence mechanisms against them are still weak. Or it can fail if it makes too much of the relationship that has been drawn between the spread of drug use and the youth crisis and political protest. "The extension of the drug problem is mainly due to the activities of drug-pushers and of drug addicts in need of funds. It is not a direct consequence of the youth crisis," says the report.

In a booklet entitled "Principles of an Information Strategy to Educate the Public about Drug Abuse", the Fed. Rep. of Germany notes: "It is now almost impossible to open a newspaper or listen to the radio without reading or hearing about the alarming increase in the use of drugs among young people in the Fed. Rep. of Germany. In most cases these reports contain no objective, factual information.

"Though supposedly intended to enlighten the reader, most articles in the press actually increase drug consumption by rousing curiosity and by minimizing the harmful aspects of drugs, dramatizing them and adding a touch of mystery to their use, thus masking the real situation."

In most countries public information on drugs has been handled in two ways. At first information was given in a random, uncontrolled fashion; but faced with the ineffectiveness of this type of approach and, indeed, the harm it caused, governments reacted by applying some general principles and introducing overall plans for radio, television and films. Trying to impose a strict discipline on the national press has often proved to be more difficult.

Six countries (Denmark, Iran (1), Jamaica, Nigeria, United Kingdom, United States) out of fourteen have used special radio broadcasts for their information campaigns. Two others (Costa Rica, Fed. Rep. of Germany) plan to incorporate facts about drug abuse into general programmes.

In all countries information via the radio is aimed chiefly at the general public, though some items are intended for the teenage audience, especially in the United States where advantage is taken of peak teenager listening times. Apparently no use has been made of the regular radio programmes designed to appeal to young people.

Programmes generally present panels of specialists answering questions on drug addiction (as in Denmark, U.K. and U.S.A.), general information on drugs (Nigeria), interviews with drug addicts or ex-addicts (Denmark, U.K.), news items about penalties imposed on drug-users and drug-pushers (Jamaica), and discussions on the question of legalizing cannabis (U.K.).

WIDE use is made of television: seven of the fourteen countries have put out programmes, and two others (Costa Rica and the Federal Republic of Germany) plan to produce special broadcasts.

In the U.S.A. an original mass media "combined operation" was carried out in April 1970. Heads of radio, television and press in New Bedford, Massachusetts got together to launch a special campaign to raise funds to extend the centre for the treatment of drug addicts, a branch of the city's largest mental health centre. Throughout April, newspaper advertisements, news releases and radio and television spots publicized the campaign. The climax was a combined radio and television marathon.

The U.K. has been especially active in the television field. From December 1969 to November 1971, seven full-length programmes were put out by the BBC and by independent T.V. networks.

Closer examination of the main themes of these programmes reveals that the information presented is largely neutral in tone and is often woven into a discussion or a detailed analysis of scientific or social implications of drug-taking.

The similarity between youthful drug addiction and the habitual taking of aspirin and other pills by adults is also touched on. The problem is thus treated in a comprehensive manner and not confined to a certain section of youth.

But in some cases the traditional type of approach is still used. For instance, the film, "Gail is dead",

1) Although Iran does not favour the introduction of systematic drug education programmes in schools, the Imperial Government has been carrying out a serious, far-reaching campaign against narcotics over the past two decades. Details of this action were given to a meeting of experts held at Unesco headquarters last January by Mr. F. Saadat, Under-Secretary of State at the Iranian Ministry of Information.

Mr. Saadat recalled that Iran instituted a total ban on the cultivation of the opium poppy in 1955. In 1969, limited cultivation was permitted for medical purposes only under strict government control.

To gain public support for its anti-drug measures the government has formed the Anti-Narcotics Society to deal exclusively with the problem. The Society regularly produces books and brochures on the subject, broadcasts anti-drug radio and T.V. programmes and, in close co-operation with the national press, publishes articles and information on the activities of the Society and on help available through government hospitals and dispensaries.

screened by the BBC, tells the story of a teenager deprived of affection who dies after taking an overdose of drugs. The film is reported to have made a considerable impression on the public. Programmes produced by the ORTF in France also aim to put people on their guard.

Articles and news concerning drugs appear in the national press in all 14 countries, but in most cases the subject has not been dealt with adequately. Four countries (Costa Rica, France, the Fed. Rep. of Germany, India) are therefore studying how to influence or control news on drug abuse published in the national dailies.

In Costa Rica such action would be taken through the Ministry of Health, in India through the Office of Press Information of the Ministry of Education, in the Fed. Rep. of Germany by a special body responsible for health education, and in France by the Interdepartmental Action Committee, an organization set up to lead the fight against drugs.

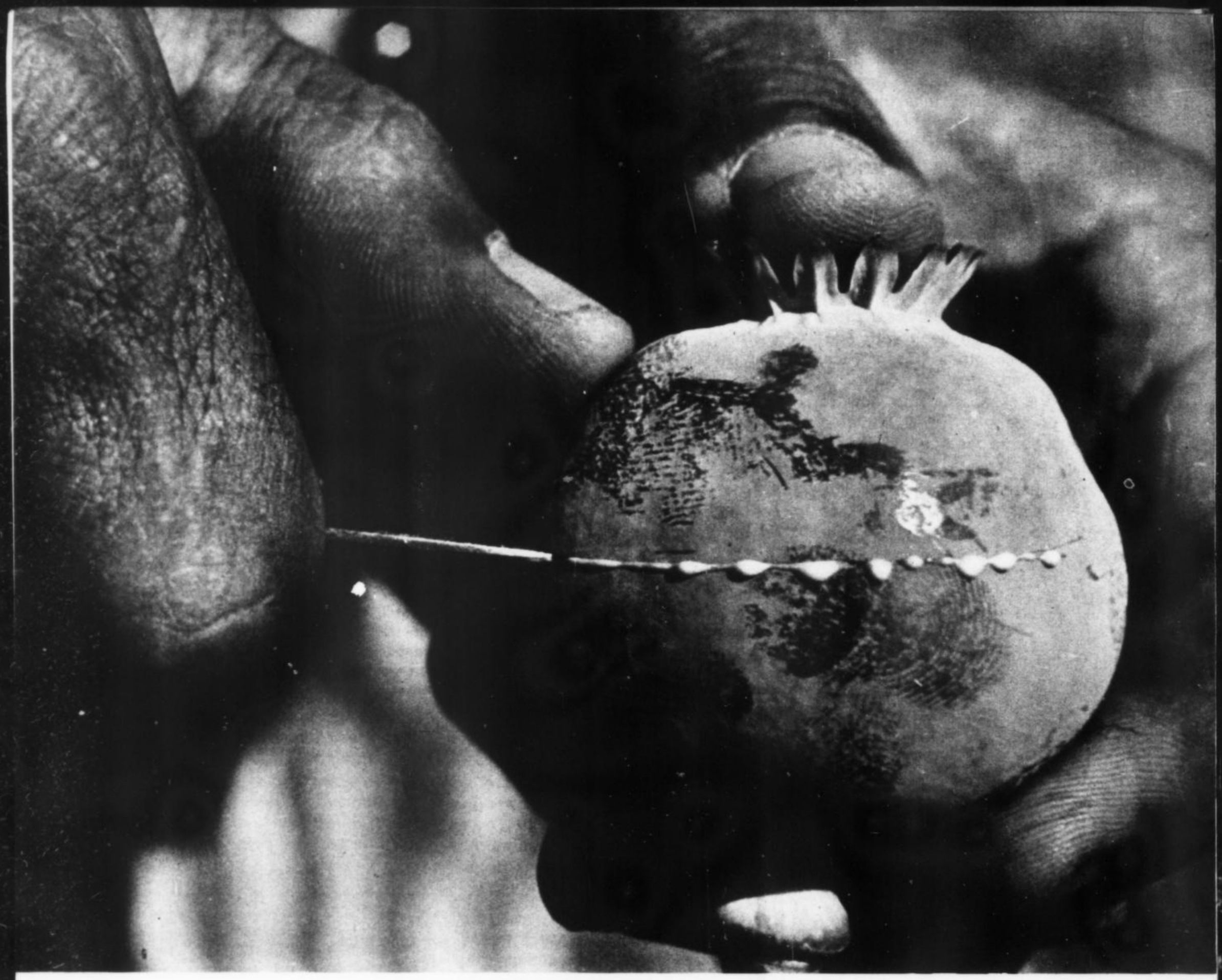
In many cases such organizations supply news items, background material for articles, research findings on drugs and special articles, such as those distributed by the Central Federal Office of Health Education of the Fed. Rep. of Germany to 153 newspapers, dealing with subjects such as the dangers of hashish or on escapism as one motive for drug abuse.

The only country to report preventive action through youth publications is France which has distributed a booklet, entitled "Fed up with Drugs", published by "Education and Social Life" in collaboration with government organizations. The booklet is illustrated with drawings and cartoons, including some by contributors to the "underground" press.

No evaluation of information campaigns on drug abuse has been made in any of the countries covered by Unesco's survey. But several countries in which drugs have been a major problem for some years, today have some useful experience of the effectiveness of different approaches. In their view intimidation has proved ineffective and it has become essential to remove the "drama" attached to the drug problem. Accurate and objective information should be given, they say, so that the public can freely take its own decisions in full knowledge of the facts. ■

Opening the 25th session of the United Nations Commission on Narcotic Drugs on January 22, 1973, Mr. Vittorio Winspeare Guiccardi, Director-General of the U.N. Office at Geneva, referred to the global problem of the illicit drug trade. "The traditional distinction between producing, manufacturing, transit and victim countries grows blurred...", he said. "The traffic flows from all parts of the world to all other parts, from developing countries to industrialized countries and vice versa." Below, coastguards inspect a coastal vessel suspected of carrying drugs.

Photo Paul Almasy - World Health Organization, Geneva



The world drug situation

An up-to-date review by the United Nations Division of Narcotic Drugs

by Istvan Bayer

IT is often assumed that international organizations are the best informed bodies in the world on the drug problem and that the U.N. Division of Narcotic Drugs in Geneva has at its disposal the best statistics on the extent of drug abuse.

It is true that the Division receives information on the abuse of narcotics from more than 130 governments each year; consequently the Division and the U.N. Commission on Narcotic Drugs can follow trends and patterns of drug abuse in the various regions of the world, but the statistics furnished by governments are relatively hard to assess.

The assumption that the Division could easily compile the collected

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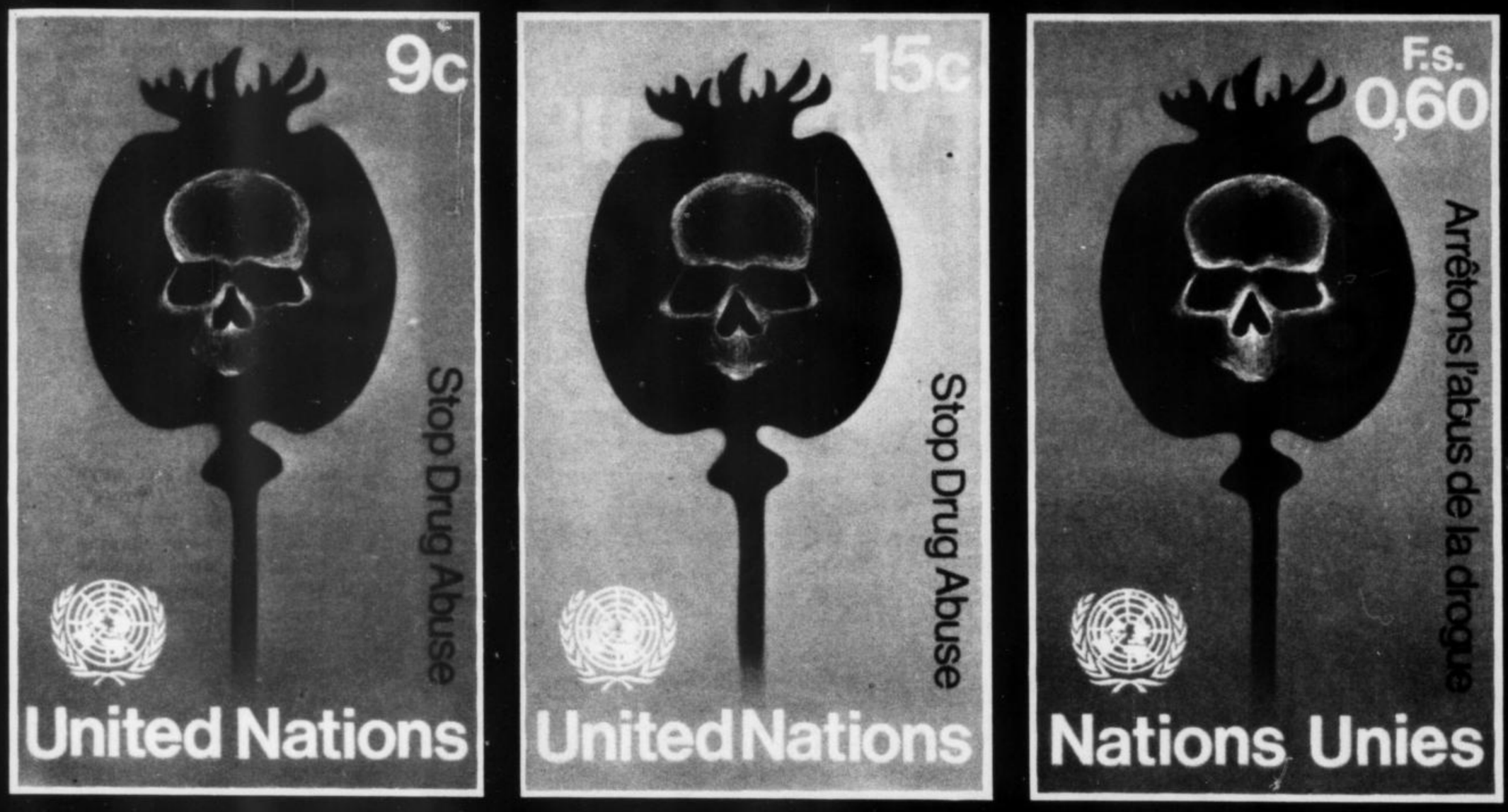

Photo Magrid Kaylan © Camera Press, London

In support of the international effort against drugs, the United Nations has just issued (13 April 1973) a new series of three stamps showing a death's head superimposed on an opium poppy head (above). When the poppy head (left) is sliced with a knife, a milky substance or latex oozes out from which are made such killer drugs as opium, heroin, and morphine.

data and present well-balanced "world statistics" in the form of a document, is, unfortunately, not correct, due to the simple fact that the annual reports furnished by governments on drug abuse do not contain very much statistical data.

It would not be realistic to imagine that the majority of governments do not want to present statistics for the use of international organs; on the contrary, experience shows that governments do furnish good statistics about illicit traffic in narcotics and most other aspects of the drug problem. Drug abuse, however, is an exception.

The explanation of this exceptional situation is relatively simple: one needs only take into account the sources of information which are at the disposal of national authorities. There are, generally speaking, two main sources of such information: reports made and data collected by (1) law enforcement services and (2) health authorities.

What kind of statistical data can be expected from law enforcement services? Data on quantities of drugs seized at the frontiers or within the country, and data on the number of people involved in "narcotic offences" such as possession of illegal drugs. All these data are very useful indications of the availability and possible abuse of certain drugs, reflecting the existence and the dimensions of the drug problem in a country, but they are of little value for the quantification of the drug dependent population. It is almost impossible to base statistical data on drug abuse solely on law enforcement statistics.

Statistics presented by health authorities usually focus on drug dependence; consequently, they might seem to be more appropriate for the development of a governmental statistical report on addiction, but, in this case too, there are a number of drawbacks.

The quality of a report by national health authorities largely depends upon the general development and level of the health service in the respective country; in many developing countries, where the number of physicians is extremely low compared with the size of the population, the health service does not have the necessary staff for case finding and data collection.

Possibilities for the collection of "hard data" on drug abuse by health authorities are limited to countries where health services are highly developed, but even these countries face many difficulties in data collection.

Let us consider the following questions: is the reporting of drug dependence cases compulsory or not? Who is obliged to make such a report and to whom? Are cases of occasional drug-taking or acute intoxication included in the reporting system or not? These are basic questions influencing even the amount of statistical data collected by national health authorities.

All of these difficulties are reflected

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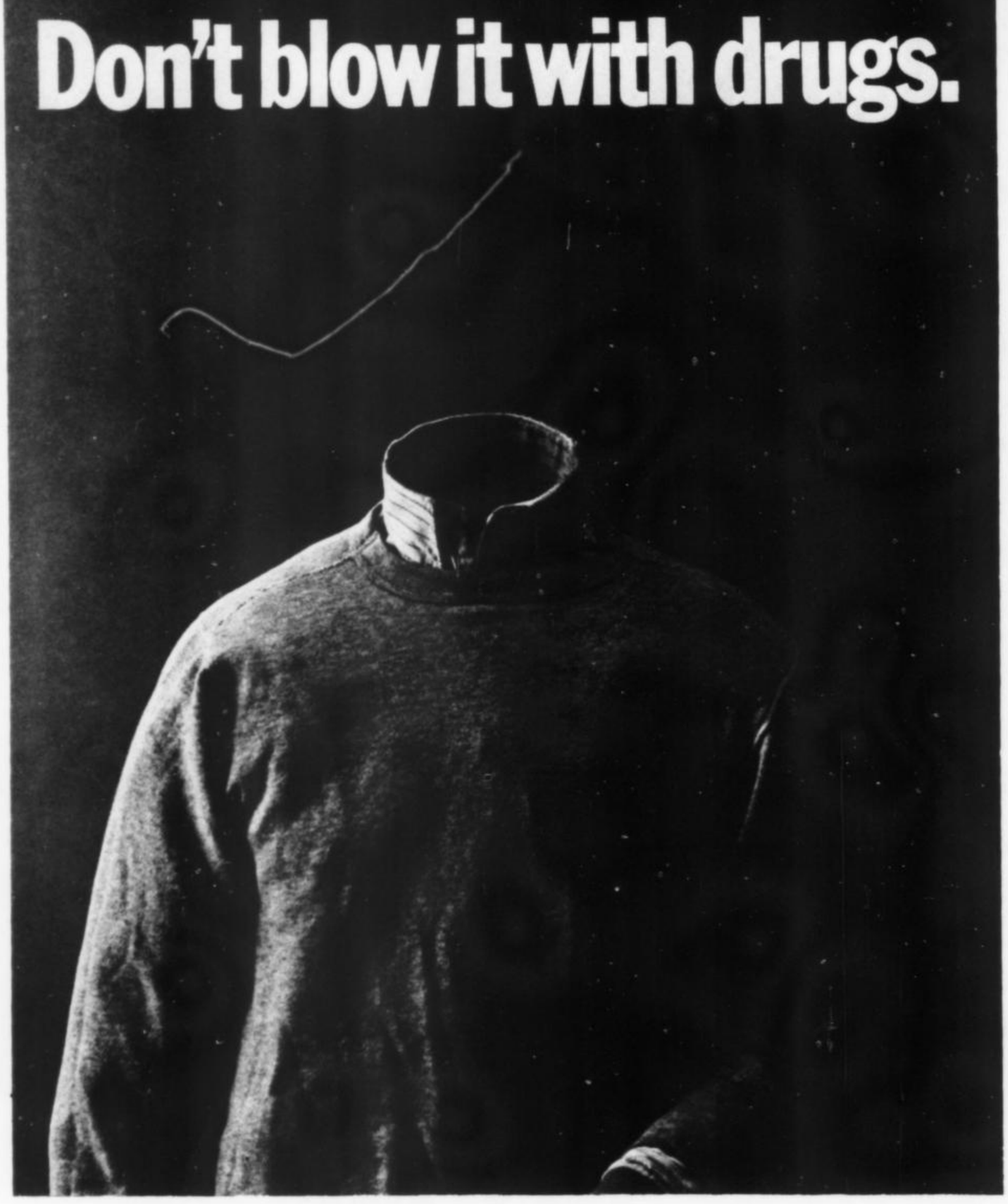

"Don't let yourself get trapped!" and "Drugs are no joke", says the poster, right, issued by the municipal authorities in Rome. The "bait" consists of LSD, amphetamines, tranquillizers and stimulants. →

The U.S. poster, left, says "Don't blow it with drugs", meaning one's head of course, and also alluding to the slang term "to blow a stick", meaning to smoke a marijuana cigarette. ←

Velasquez' famous painting "Los Borrachos" (The Topers) serves as the theme for the poster below, published by the Spanish National Office of Psychiatric Assistance. "Alcoholism is an illness, not a vice," reads the caption, "Treatment centres are there to help you."

"Here I come, Mum", says the poster below by cartoonist VEN, one of a series published by the Bulgarian National Anti-Alcohol Committee in Sofia.

The self-destroying effects of drug-taking are strikingly portayed in this poster, above, by the German artist Sebastian Blei, published by the Drugs Prevention Bureau in Munich (Fed. Rep. of Germany).

POSTERS AGAINST DRUGS

Last December at an international conference organized by Unesco on education and drug abuse, Unesco presented an exhibition of posters from different countries on the drug question. The exhibition was originally assembled in Canada by the Office for the Prevention of Alcoholism and Other Addictions, in Quebec. On these pages we present a sampling from this poster exhibition. A second international exhibition of posters was displayed at the same time by Switzerland (see page 28).

Tranquillizers, amphetamines and hallucinogens are bad cards to have and the right thing to do if confronted with them is to "pass" them up. Poster published by the Bureau for the Prevention of Alcoholism and other Addictions, in Quebec (Canada).

Examples that show only the 'tip of the iceberg'

in the annual reports, and it is no wonder that high quality statistics are usually presented by health authorities (1) on sick people who were treated with narcotic analgesics (thereafter showing symptoms of dependence) and (2) on addicts treated in hospitals. The first group of people has nothing to do with drug abuse as a social problem; the second group shows only the "tip of the iceberg". Consequently, statistics compiled by health authorities do not give a clear and complete view of the drug problem.

The Division of Narcotic Drugs prepares documents on drug abuse for the sessions of the Commission on Narcotic Drugs. Statistics furnished by governments are included in these documents, but are not suitable for comparison. The Commission and the Division have undertaken the revision of the reporting system and efforts are made to assist governments in improving the quality of their statistical data, but it would be unrealistic to think that uniformity of data collection could be developed within the near future. In developing countries with a drug abuse problem, much more can be learned from sample surveys than from the finding of individual drug abuse cases.

In view of this situation, any question concerning the "total number of drug abusers" must remain unanswered. There are a number of other difficulties in answering this question, and, while pointing out the absence of a standard interpretation of the term "abusers", we would like to draw attention to the inherent pitfalls of statistics or "total numbers" which would include *all* abusers of *all* drugs.

"Narcotic drug" (such as opiates, cocaine, cannabis, coca leaf) and "psychotropic substance" (such as sleeping pills, stimulants, hallucinogens) are *legal* terms and *not pharmacological* definitions. Consequently, in the field of drug abuse, on the one hand, the distinction between the two terms is not justified, and on the other, a distinction should be made between abusers of specific types of drugs. (Both coca leaf and heroin are "narcotic drugs", but there are very few similarities between a coca leaf chewer and a heroin "mainliner"; persons dependent on morphine—a "narcotic drug"—or on secobarbital—a "psychotropic substance"—might show, on the contrary, several common features.) Consequently, this article gives a general view of the world's drug abuse situation based on the type of drug used.

OPIUM AND OPIATES. There are a number of countries where the use of opium was traditional. Opium, as a medicament or as a "pleasure giving drug", was used by millions of people without social stigma: it was a "social" substance.

The world has changed, more and more countries have become aware of the dangers of opium abuse and dependence, and the international community has played a major role in the prevention of the propagation of opium abuse in countries where this practice never existed and in the reduction of the extent of opium use in countries where opium was a traditional drug.

India and the People's Republic of China are the countries in Asia where the changes have been the most spectacular. Annual opium consumption has been reduced from 500 tons at the beginning of this century to about 5 tons at the present annual consumption in India. The present number of opium addicts is less than 100,000, and there are no more than 1,000 registered opium smokers in the country.

In China, at the beginning of this century, there were an estimated 10 million opium addicts; and in 1973, in the Commission on Narcotic Drugs, it was stated by the observer for the People's Republic of China that opium addiction had been eradicated in that country.

Iran made a great effort to eradicate opium abuse, but was not so successful; opium production has been resumed because the opium prohibition (in 1955) was followed by large scale opium smuggling into the country. Opium abuse continued, with catastrophic economic and social consequences. Iran has introduced a system of addict registration, and 80,000 opium addicts (who are over 60 years of age or who cannot be given detoxication treatment because of their condition) receive a ration of legal opium established by medical committees.

There are reports of opium abuse in Asia from Burma, Hong Kong, Thailand, the Republic of Viet-Nam, Laos, Singapore and Pakistan. There are relatively few cases of opium addiction in Africa, in the Americas and in Europe. The former "therapeutic addiction" to opium has disappeared due to the fact that no more than small quantities of opium are used for medical purposes in these regions (contrasting with some Asian countries where opium is even now an important medicament).

This situation does not mean that these regions are absolutely free from "symptoms" of opium addiction or that there are no more "therapeutic addicts", but the drug abuse scene has followed the lines of industrial development. Opium has been replaced in therapy by morphine, other

LATEST U.S. DRUGS STUDY CALLS FOR A NEW APPROACH TO THE PROBLEM

In a report issued on March 22, 1973, in Washington D.C., the U.S. National Commission on Marijuana and Drug Abuse has called for a far-reaching change of attitude on the whole problem of drugs. It termed the present attitude "inconsistent and founded on many misconceptions". Among more than 100 recommendations in its 481-page report, the Commission proposed:

- **A moratorium on all drug education programmes in schools until existing programmes can be evaluated. The Commission found these programmes "scientifically inaccurate and ineffective".**
- **Severe punishment for drug traffickers.**
- **No relaxation of existing legal controls over narcotics, with "the highest possible restrictions" placed on heroin.**
- **Legalization of possession of marijuana.**
- **An end to advertizing of sedatives, tranquillizers, stimulants, and other "mood-altering drugs" that promise to halt "malaise caused by stress or anxiety".**
- **The establishment of a Federal agency to take over all U.S. drug programmes—law enforcement, education, research and treatment.**

The Commission called dependence on alcohol "without question the most serious drug problem in the country today", adding "The most serious concern in contemporary America should attach to the use of alcohol and heroin." The Commission described the present widespread use of barbiturates as "America's hidden drug problem".

opium alcaloids and by derivatives or synthetic alternates of these alcaloids.

"Therapeutic addicts" are, consequently, no longer dependent on opium, but on morphine or pethidine or methadone. A process similar to this "legal" development has taken place in the illicit market and among drug abusers: in a number of countries, opium abuse has been "replaced" by the abuse of heroin.

There is, in fact, no legal heroin production in the world. All of the heroin consumed is made in clandestine laboratories from huge quantities of illicit opium produced in areas where governmental control is poor or non-existent.

The number of heroin addicts has increased, notably in North America where in addition to the "traditional milieu" (the slum areas) new layers of the population are affected by this form of addiction. The North American scene is characterized by "mainlining", that is, intravenous injection of heroin. The quantities injected are very high because heroin is adulterated with quinine, procaine, lactose and other substances; the "heroin" on the New York black market does not contain more than 3 to 5 per cent of diacetylmorphine (heroin).

The number of heroin addicts in Europe is relatively low (in the United Kingdom, for example, the authorities have reported about fifteen hundred addicts who are regular users of heroin), but in some Western European countries the number of drug abusers experimenting with heroin is on the increase (in France, for example, the number of heroin abusers has been estimated to be about 15,000).

Heroin remains the main drug of abuse in Hong Kong; contrary to North American "mainlining", heroin is inhaled in the Far East. The same techniques of heroin abuse prevail in Thailand (where heroin abuse has been spreading since the introduction of the opium prohibition), in some other countries in Indochina and in Iran.

It is relatively easy to produce heroin in a clandestine laboratory but the production of morphine base is even easier. The abuse of so-called "morphine base" is, consequently, spreading in some countries in Asia and in Europe (notably in Northern Europe).

There is an increase in the abuse of the so-called synthetic narcotics (synthetic alternates of morphine and other opium alcaloids). There are a number of "therapeutic addicts" who have became dependent on these substances, notably in Europe following treatment with pethidine, methadone or dextromoramide. The most substantial increase in methadone dependence cases has been experienced in countries where this drug is in use as a substitute for heroin. The increase in the number of methadone dependence cases is a "side effect" of "methadone maintenance" in the United States, Canada and a few other countries.

CANNABIS. The assessment of the "world cannabis situation" is even more difficult than that of opium and opiates. The view is hindered by:

- a lack of statistics on the number of consumers;
- the fact that in some Asian countries the use of cannabis is still authorized or tolerated; and
- the absence of a standard definition of the "cannabis" consumed by local users.

The general use of the term "cannabis" without further defining the drug (e.g. cannabis resin, cannabis as defined in the Single Convention (1), marijuana, etc.) contributes substantially to the confusion, but some trends and patterns in cannabis abuse can be more or less detected.

The only figure available from areas where the traditional use of cannabis remains authorized is an estimate of 200,000 consumers in India. The consumption of cannabis resin has been prohibited in that country, but cannabis itself (in the forms of ganja and bangh) is still in use for medical, quasi-medical and ceremonial purposes, as well as being a "social substance".

Cannabis abuse remains a problem in the Near and Middle East, where huge quantities of cannabis resin (hashish) are produced. A part of the hashish produced is consumed locally (increasingly by tourists, and first of all the young ones) part is smuggled into non-producing countries of the region (for example into Egypt or Turkey) and an ever increasing part finds its way through the organized illicit traffic to Western Europe.

CONTINUED NEXT PAGE

(1) The Single Convention on Narcotic Drugs, adopted in 1961, came into force in December 1964. It replaces nine existing treaties, extends control to the cultivation of plants from which the "natural" narcotics are made, namely opium, cannabis and coca leaves, and simplifies the international control machinery.

UNITED NATIONS BODIES IN THE FIGHT AGAINST DRUGS

Various bodies of the United Nations are engaged in the concerted international anti-drug effort: (1) U.N. Commission on Narcotic Drugs (2) U.N. Division of Narcotic Drugs (Geneva) (3) U.N. Social Affairs Division (4) U.N. Social Defense Research Institute (Rome) (5) U.N. Research Institute for Social Development (Geneva) (6) U.N. Conference on Trade and Development (7) U.N. Industrial Development Organization (8) U.N. Food and Agriculture Organization (9) World Health Organization (10) International Labour Organization and (11) Unesco. In April 1971 the U.N. Fund for Drug Abuse Control was set up to co-ordinate and finance action by U.N. and other organizations.

Many inter-governmental and non-governmental organizations are working on the problem of drugs. Amongst these are: International Narcotics Bureau, Interpol (International Criminal Police Organization), League of Red Cross Societies, International Council on Alcoholism and Addiction, and the Council of Europe.

FURTHER READING

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Abuse of cannabis (in the form of ganja cigarettes) is spreading in the Far East, but the increase in the number of cannabis abusers seems to be greatest in North America and in Western Europe, where the "cannabis question" has become an emotional topic.

There is a substantial increase in the use of cannabis resin in some West European countries. The consumption of hashish is increasing in the United States and Canada too, but the principal form of cannabis abuse is the smoking of "marijuana".

It is very difficult to find out what "marijuana" means. In Latin American countries, this term has been applied to cannabis leaves. In the light of the analysis of marijuana samples seized in North America, it is applied sometimes to something which contains very potent cannabis preparations, sometimes to "cannabis" (in the sense of the Single Convention), sometimes solely to leaves of cannabis, and sometimes to something which does not contain cannabis at all. Without a basis for comparison, it is impossible to determine or even estimate how many hashish users and cannabis users are among the several million regular or occasional marijuana users in North America and in some West-European countries.

There are a substantial number of "dagga" consumers in South Africa, Cannabis abuse is spreading in other countries too, notably in West and East Africa.

There are reports of the abuse of "cannabis oil" or "hashish oil". This preparation contains a large amount of tetrahydrocannabinol (THC), one of the active principles of cannabis; consequently, its use is even more dangerous than that of hashish.

COCA LEAF. Coca leaf chewing remains a social problem in the Andean countries of South America where huge quantities of coca leaves are consumed by the indigenous population. According to the Argentine government's report, the number of coca-leaf chewers in that country is estimated at 50,000. This figure does not reflect the size of the problem in the whole region, where the number of addicts is of the order of several million.

COCAINE. In the light of seizure reports, the production and consumption of cocaine is on the increase. Little data is available on cocaine abusers because the majority of cocaine abusers are multiple drug abusers. There are many cocaine abusers among heroin addicts.

PSYCHOTROPIC SUBSTANCES. There are very few official reports on psychotropic substances at the disposal of the Division of Narcotic Drugs. The Convention on Psychotropic Substances of 1971 is quite recent and has not yet entered into force. Until now, very few governments have collected data on the abuse of these substances.

There are contradictory reports on the use of **hallucinogens.** A decrease in the abuse of LSD was recently noted by North American experts, but in some West European countries the number of LSD abusers was on the increase. LSD remains the most widely abused hallucinogen, and cases of its abuse have been reported from other regions of the world (Africa, Asia and the Far East).

Abuse of **stimulants** of the central nervous system is still spreading. Amphetamine, dexamphetamine, methamphetamine and phenmetrazine are the most frequently abused stimulants. "Mainlining" (intravenous injection) of excessive doses of stimulants remains a problem in some West European and North American countries.

There are indications that substantial quantities of various amphetamine tablets have been smuggled into African countries; the control of importation and distribution of these drugs is relatively lax in many African countries, and several governments in the region are worried about the growth of amphetamine abuse.

There is only limited data on the abuse of **hypnotics, sedatives** and **tranquillizers,** but many indications of an increase in their abuse. No region is free from the abuse of these substances, but people abusing hypnotics, sedatives or tranquillizers are usually multiple drug abusers. Data collection concerning their abuse is therefore very difficult.

MULTIPLE DRUG ABUSE. It was noted by the Commission on Narcotic Drugs at its last session in January-February 1973, that the trend towards multiple drug abuse among drug abusers seemed to be a common feature of the drug scene in various parts of the world. This trend was due partly to the availability on the black market of different types of drugs, and partly to changes in the "taste" of drug-takers experimenting with a great variety of legal and illegal drugs.

There are some well-known drug-combinations such as heroin-cocaine, barbiturates-amphetamines, heroin-barbiturates, but the number of people consuming five or ten different drugs at the same time or alternatively is increasing every day. ■

A Unesco inquiry on the harmfulness of cannabis

Although the harmfulness of drugs is generally recognized, this has been challenged in some countries and by certain groups, particularly with regard to the effects of drugs such as cannabis. Unesco last year undertook an inquiry on this question as part of the international study it carried out on drugs (see page 6). In the article which follows we summarize the findings of the cannabis inquiry.

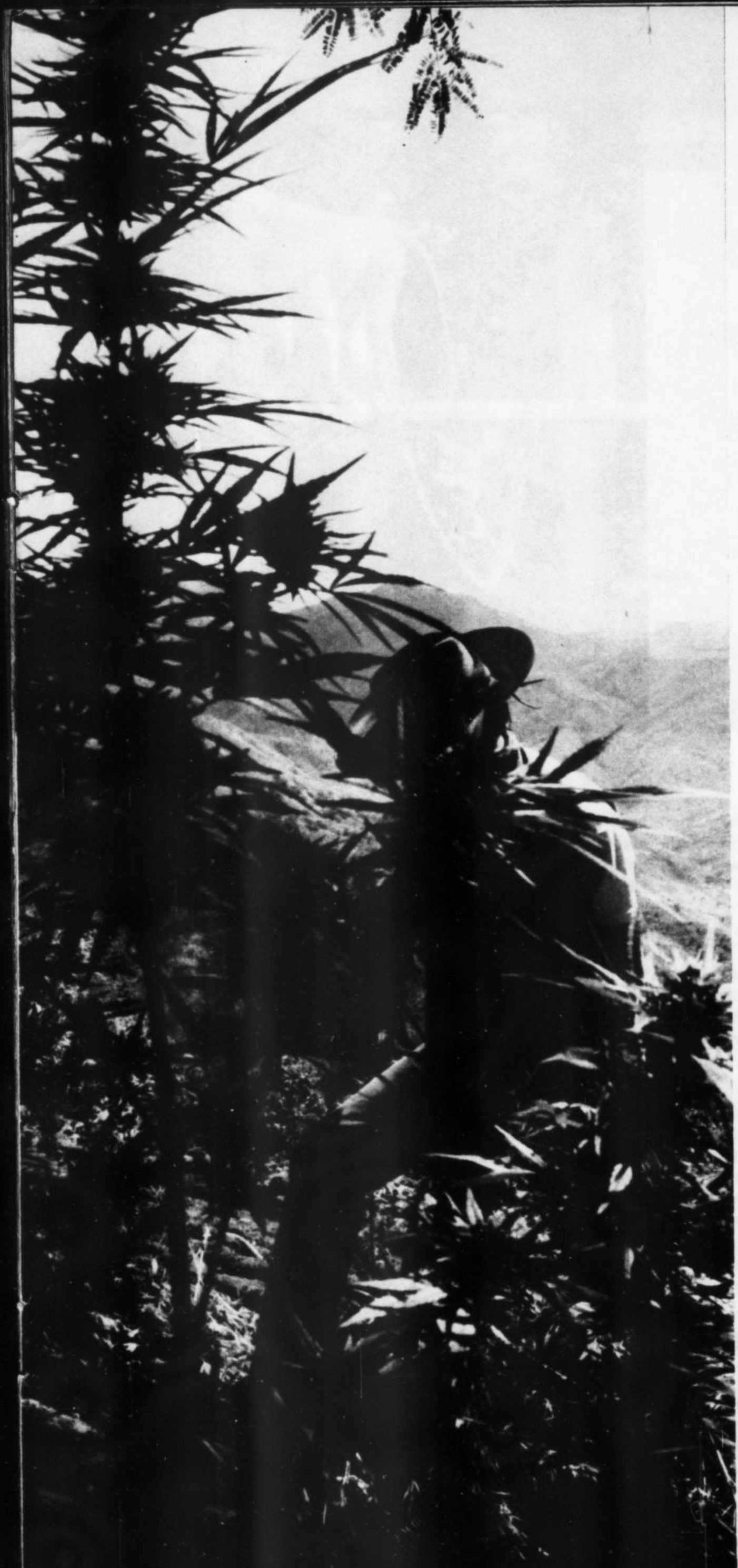

Photo Eugène Anthony © Black Star

Cannabis, or Indian hemp, is grown in all parts of the world's temperate and tropical regions and is also found, as a wild plant, is some parts of India and Latin America (above). It is from cannabis that substances know variously as hashish, marijuana, kif, ganja, bhang, charras and maconha are obtained.

IN the United States, an opinion fairly widely held among young people is that marijuana is no more harmful than alcohol and that its use should therefore be legalized and brought under regulation in the same way as the use of various alcoholic drinks. The prevailing view, however, is that it would be wiser to await the results of current research before treating marijuana in the same way as alcohol, and that in consequence the use of marijuana should continue to be prohibited.

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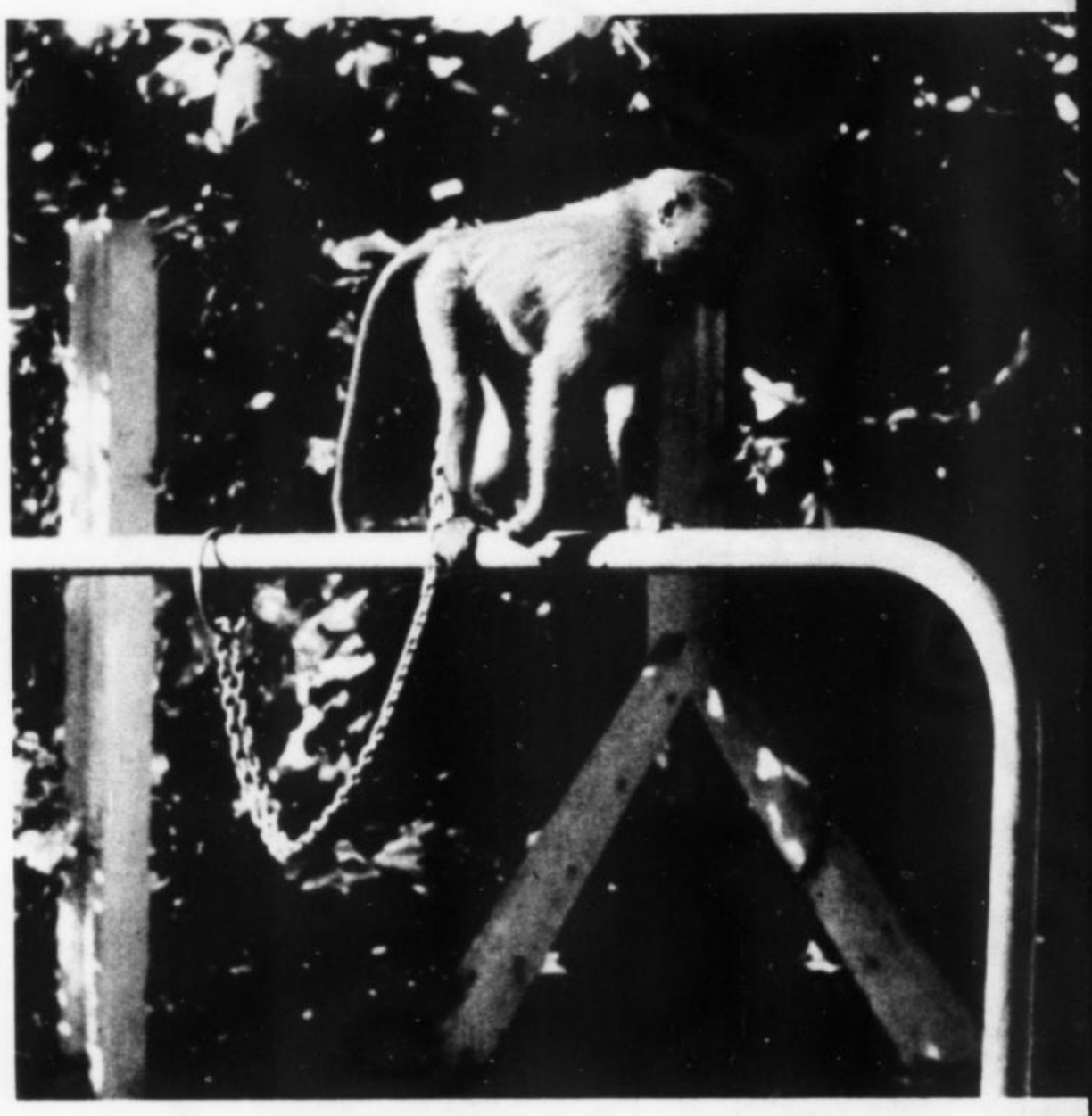

Is marijuana a first step to stronger drugs?

It is only since 1968 that detailed scientific studies have been made in that country on the effects produced by the products of cannabis. The findings of this research to date have enabled the authorities to state, in a joint information publication intended for the public at large, that while marijuana and hashish may not cause physical dependence, the long-term use of these substances brings about a psychological dependence.

According to this publication, the excessive use of cannabis can have harmful effects, particularly from the psychological and social standpoints, since it puts an artificial gloss over reality and thus causes excessive users, particularly young people, to avoid facing up to life's real problems and to fail to develop their physical and mental abilities. Lately, some research workers have thought they were able to establish a connexion between the abuse of cannabis and a certain type of social maladjustment.

It should be borne in mind that the view in the United States is that the effects of the chronic use of cannabis are not yet scientifically known. Medical literature contains an abundance of reports on the acute psychoses occasioned by the prolonged use of Indian hemp (cannabis) but it is thought that this problem still calls for scientific research on a wider scale.

As for the "escalation" which the use of the products of cannabis is said to entail, in other words the progression to the use of stronger and stronger drugs, the opinion is that marijuana does not by itself create the need to use other drugs, but surveys carried out by the U.S. National Institute of Mental Health show that excessive users of marijuana tend to experiment with other substances: most often hashish, and then strong hallucinogens, amphetamines, and, occasionally, barbiturates. A small number also progress to opium or heroin.

A survey carried out in a college showed that among the heavy marijuana smokers, one per cent became heroin addicts. Other surveys, however, carried out in California among persons arrested for using marijuana, revealed a much higher proportion of heroin addicts, ranging from 13 to 22 per cent.

Moreover, surveys conducted among heroin addicts have shown that about 85 per cent of the persons questioned tried marijuana to begin with. In addition, certain lawyers are of the opinion that the criminality rate is higher among excessive users of marijuana.

For the purpose of advancing the study of problems relating to the use of the products of cannabis and of arriving at scientifically valid conclusions, the Comprehensive Drug Abuse Prevention and Control Act of 1970 provided for the establishment of a Commission on the abuse of cannabis and narcotic drugs, which was to examine the extent and effects of the use of these substances and to evaluate the efficacy of the laws in force in this matter.

After a year's work involving scientists and experts in all the branches of learning that might be concerned by these problems, the Commission last year submitted its first report to the President and the Congress of the United States.

THE Commission bases its findings on the results of a national survey carried out under its auspices, and it considers that the use of marijuana is at present spreading in all sectors of the population of the United States. This survey estimates that about 24 million Americans over eleven years of age, that is to say, 15 per cent of the adult population over 18 years of age and 14 per cent of the adolescents between 12 and 17, have tried marijuana at least once.

The survey points out that among those who have used marijuana, 41 per cent of the adults and 45 per cent of the adolescents have given up its use, but there are nevertheless now half a million persons who have become excessive users, taking this drug several times a day.

The Commission is of the opinion

Monkeys and Cannabis

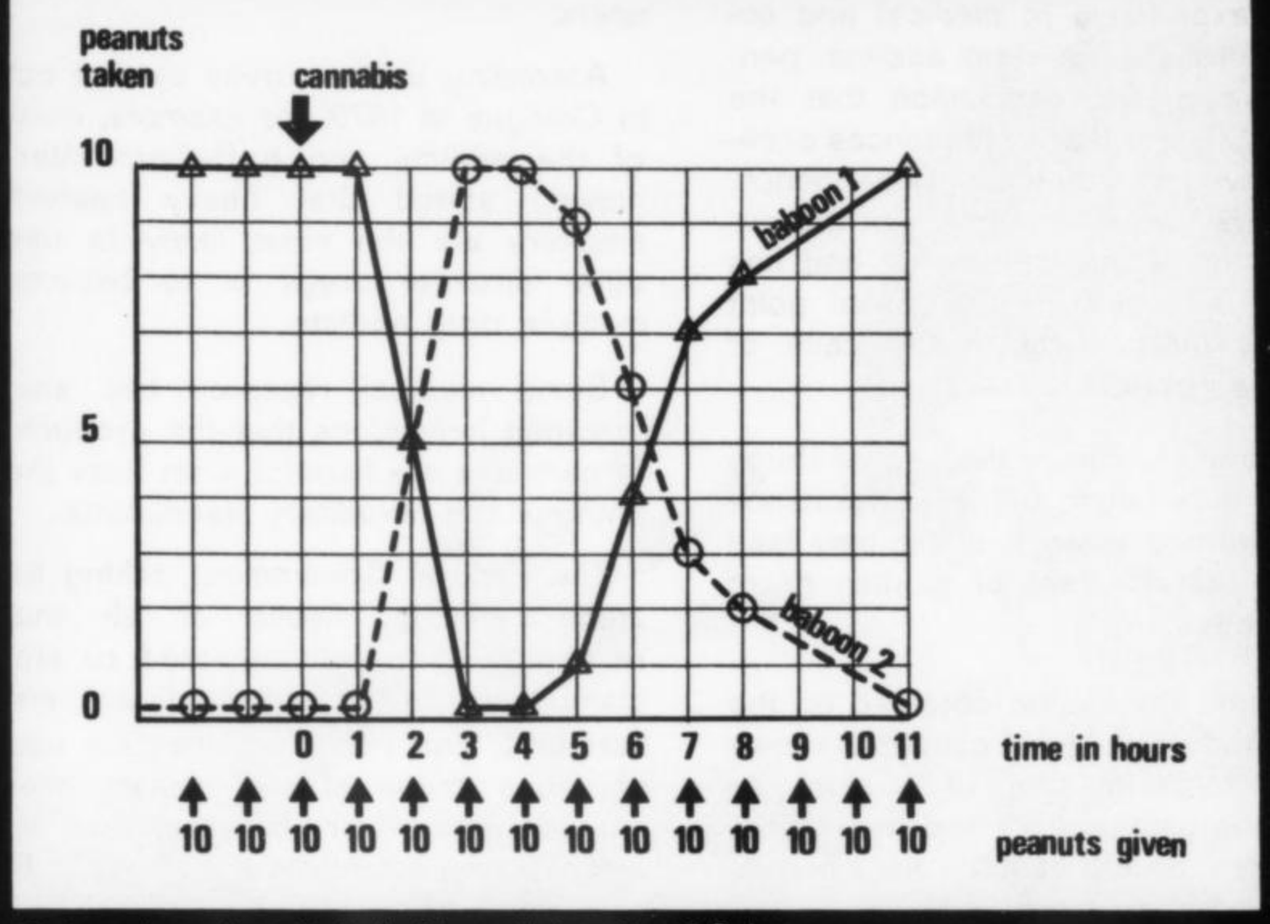

Photo and graph © Prof. H. Giono, University of Dakar

A series of experiments on the behaviour of baboons under the effects of cannabis and other psychotropic substances was recently carried out at the University of Dakar, Senegal, by Professor H. Giono. A baboon injected with cannabis rapidly experienced difficulties of balance and was unable to move along or hang from the horizontal bar of a climbing frame (far left). Cannabis also affected the animal's social behaviour: social contact was reduced, sexual relationships diminished and grooming activity and play restricted. A test with peanuts provided further evidence of the effects of cannabis. Two animals sharing a cage were made to compete for food. After absorbing a dose of cannabis the stronger of the two, who normally seized the food, was reduced to a pitiful state of weakness (see graph, left). With a regular dosage of cannabis, the animal became aggressive and bad-tempered.

that any psychoactive substance is potentially harmful to the individual, according to the intensity, frequency and duration of its use, and that marijuana is no exception.

In examining in this way the effects of the products of cannabis on the individual, the Commission has come to the conclusion that although the risks of harm, in so far as it has been possible to prove them, resulting from the experimental or occasional use of these products are slight and do not produce demonstrable organic lesions, the danger lies in the excessive and prolonged use of these products and in particular of their strong preparations.

Some of the moderate users show signs of a certain psychological dependency, the intensity of which increases with the drug's continued use. Prolonged use increases the likelihood of the occurrence of effects on behaviour and on the organism such, for instance, as progression to excessive use.

Excessive users show a strong psychological dependence on marijuana and often on hashish. These users are susceptible to organic lesions and may show signs of specific changes in behaviour. These effects are more apparent, however, when use is over lengthy or very lengthy periods.

Finally, persons who make unlimited usage of cannabis and who live in countries where the use of this drug, usually in the form of hashish, is an indigenous and traditional custom, have in consequence a psychological dependence. As the use of the drug continues, the changes in behaviour appear very clearly and the cases of biological lesions become more frequent. This type of use is not, however, observed in the United States.

The Commission is of the opinion that, in the present state of knowledge concerning the effects of the products of cannabis, their use does not constitute a major threat to public health. This should not lead to complacency, since it is none the less true that these substances are harmful.

WITH regard to the changes in behaviour which might be induced by use of the products of cannabis, the Commission is very critical of the widely accepted stereotype according to which the users of this drug are aggressive, lacking in self-control, irresponsible, mentally sick, inclined to crime and, in consequence, a danger to public safety.

The Commission points out that, although there may be a statistical correlation between the use of the products of cannabis, examined independently of the other variables, and the frequency of criminal or other offences, there is no convincing proof that the use of these products inevitably leads or incites to crime and violence.

The American Commission rejects the idea of regulating or legalizing the use of marijuana the long-term effects of which are not yet certain, but is unanimous in thinking that persons who smoke or possess marijuana should not be liable to prosecution (1).

In **Sweden,** the official position, and particularly that of the police, is to consider the abuse of hashish and marijuana as an introduction to the excessive consumption of major narcotic drugs such as opium and LSD 25. Nevertheless there are varying points of view with regard to the social significance of the use of the former drugs and the effects they may have on an individual's behaviour.

The police consider that there is a close connexion between the abuse of narcotic drugs in general and delinquency, since drug addicts often engage in drug trafficking or commit other offences so as to get the money they need to buy their drugs. In support of their argument, the police also point to the fact that the proportion of drug users is higher among

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(1) *For the Commission's March 1973 report, see box page 20.*

those people who have been sentenced by the courts.

In **Denmark,** it is stated that the ideological propaganda for, and the philosophical justification or cult of, cannabis have now practically disappeared.

In **Jamaica,** according to the reply of the National Commission for Unesco, there are contradictory opinions because scientific knowledge concerning the effects of ganja [a form of cannabis] is still approximate and the conclusions reached are divergent. The effects attributed to the use of ganja can be neither categorically denied nor categorically confirmed.

In the **Federal Republic of Germany,** the harmfulness of hashish and marijuana has been called in question by several publications, and certain circles are suggesting that the use of these drugs should be legalized.

Despite the differences of opinion that are apparent concerning the physical effects of the products of cannabis, research in social psychiatry, psychology and education, as well as actual experience in medical and social institutions for drug addicts, generally reach the conclusion that the habitual use of these substances occasions a psychological dependence, conduces to the impairment of the development of the personality and has harmful effects from the social point of view, particularly in the case of unstable individuals.

In many instances, the use of drugs results in a falling off in performance at school and at work, which may lead to the abandonment of studies or of employment.

Further, information obtained on the use of the products of cannabis shows that a large number of hashish or marijuana smokers try and then adopt stronger drugs such as heroin, LSD 25, etc. It should, however, be mentioned that according to some research, the phenomenon of "ecalation" occurs mostly among excessive users.

According to the survey carried out in Cologne in 1970, for example, most of the addicts and traffickers interviewed stated that heavy hashish smokers are the most likely to use other stronger drugs or to become multiple drug addicts.

Some medical research has also provided indications that the products of cannabis are harmful even from the physical and hereditary standpoints.

The Federal Government, taking its stand on the results of all this research, is entirely opposed to any claim that hashish and marijuana are harmless, and considers that the use of these drugs should remain prohibited until their harmlessness is scientifically established. ■

SPIDERS' WEBS AND LSD. The spider's web is a prolongation of the animal's own central nervous system. Researchers can thus measure changes in the spider's behaviour when it is given doses of a psychotropic substance. A research team led by Dr. Georges Groh carried out experiments at a hospital in Quebec (Canada) in which they gave doses of LSD 25 to a species of marsh spider, the "Argyropes". Photos below show how web-spinning deteriorates under the influence of the drug. Left, after a single weak dose of LSD, the web already begins to show imperfections. Centre, after minor doses administered for ten days, the pattern of the web shows serious irregularities. Right, after five weeks of LSD the web is unrecognizable, reduced to a few suspension lines and a jumble of threads at the centre. It has ceased to be an efficient food trap for the spider.

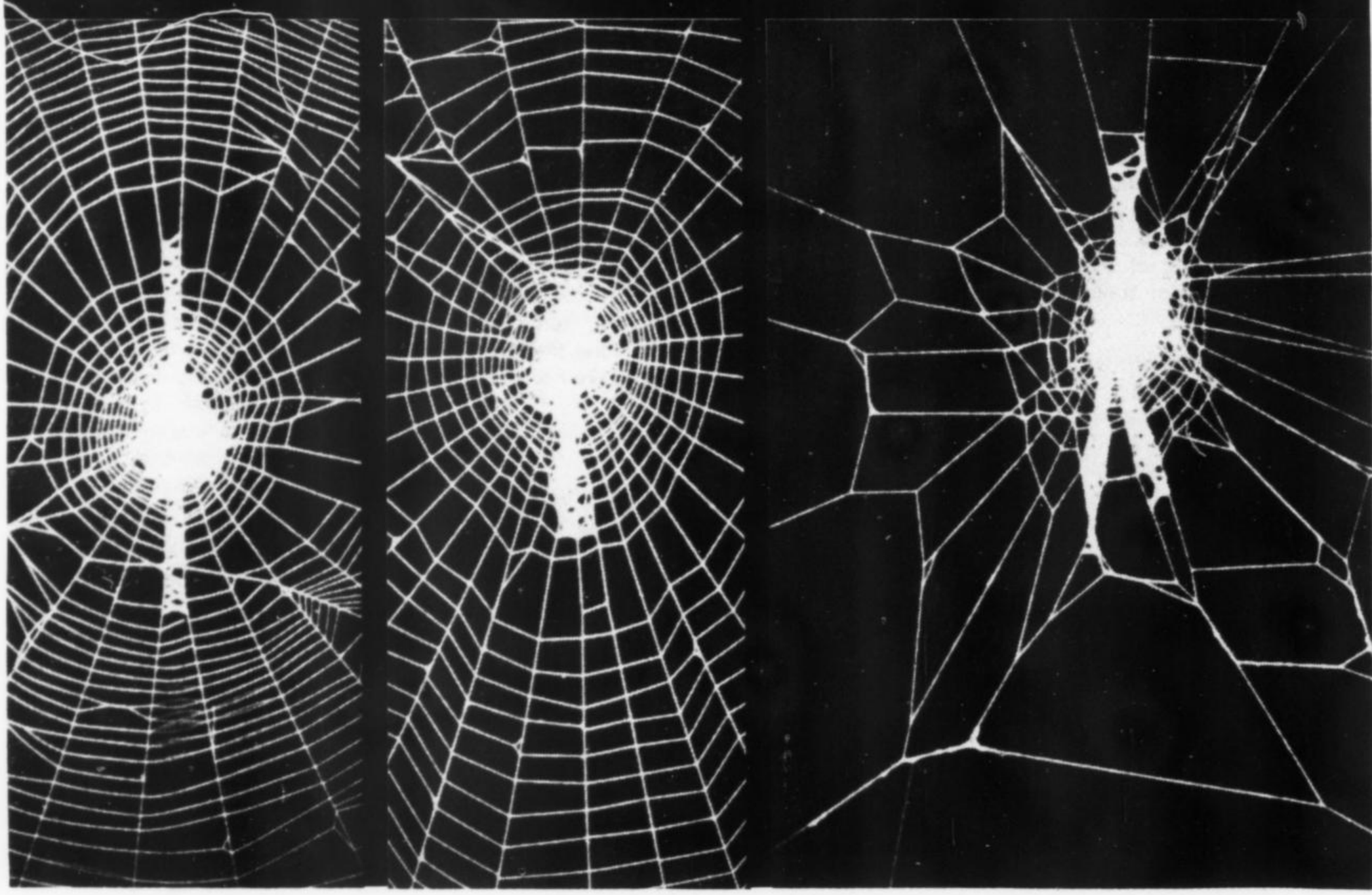
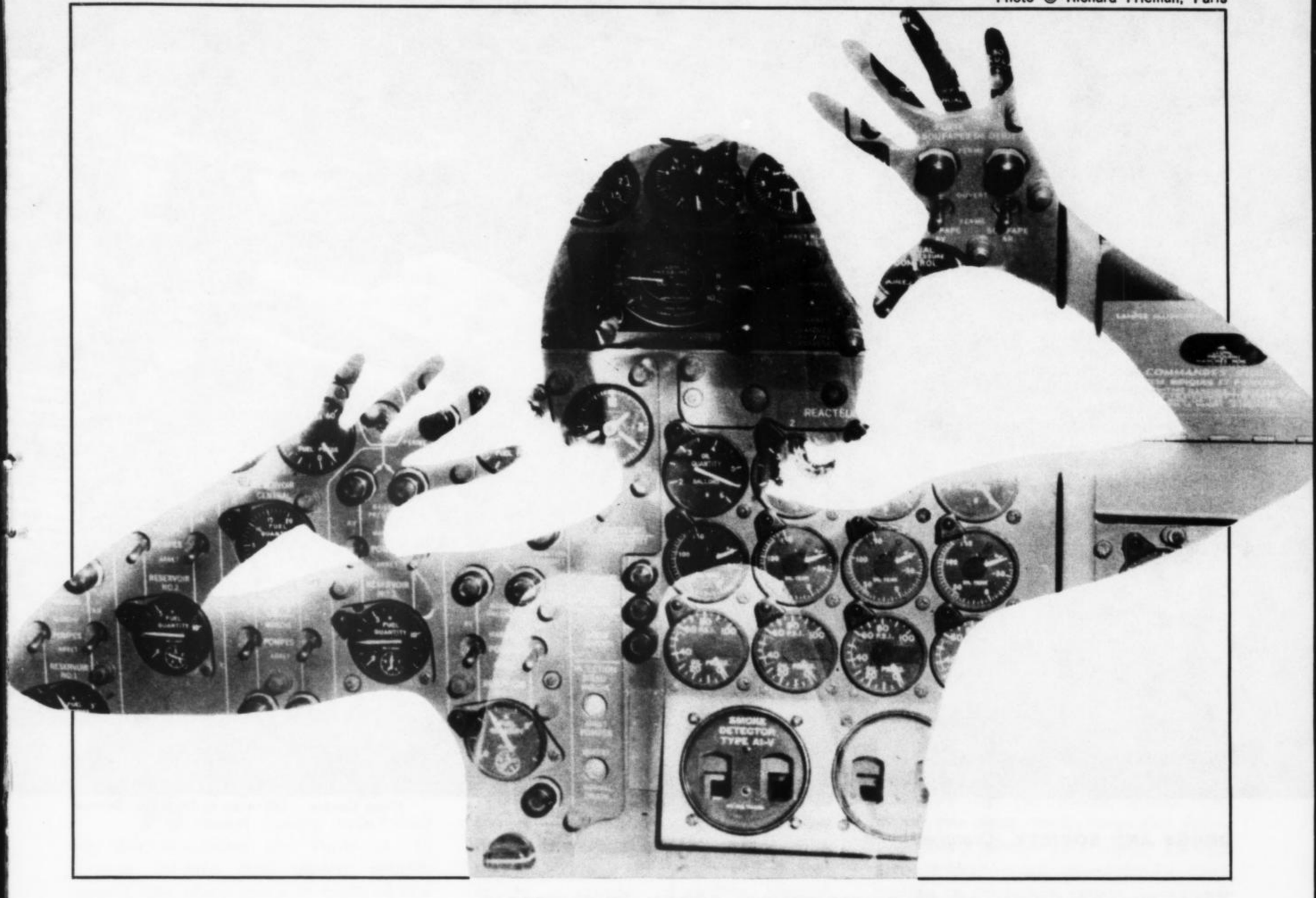


Photo © Georges Groh, Hôpital des Laurentides, Quebec, Canada

Photo © Richard Frieman, Paris



Drugs and society

Are we doomed to despair, to the meaninglessness of human existence, to the absurd and the grotesque portrayed by Camus, Ionesco and Beckett?

by Marcel Hicter

MARCEL HICTER *is Director-General for Youth and Leisure at the Belgian Ministry of Culture and is on the Faculty of the Université Libre, Brussels. He was Belgian delegate to the International Conference on Youth organized by Unesco at Grenoble, France, in 1964 (See his article "The Angry Generation", "Unesco Courier", April 1969). Prof. Hicter is the author of a major study, prepared for a symposium on drug dependence organized by the Council of Europe at Strasbourg last year, of which the article published here is a condensed, edited version.*

ARE we doomed to despair, to the meaninglessness of human existence, to the absurd and the grotesque portrayed by Camus, Ionesco and Beckett? How can man live in a scientific age when he is no longer master of the situation? Technology is no longer guided by man, it is impelled forward by its own needs.

I have re-read the futurologists of both East and West. The "future shock", the psychosomatic disease of the entire human organism, is spreading because of man's inability to adapt himself rapidly enough to the lightning progress of technology.

Restricted by its human dimensions, our conceptual capacity is now insufficient. The more man grasps of nature, the less he can understand his own nature. To quote the Hungarian-born British scientist Dennis Gabor, in his book "Inventing the Future": "Till now man has been up against nature; from now on he will be up against his own nature."

Man will become integrated into complex operational systems which are multi-functional and multidisciplinary and which will continually call for new methods of synthesis and a

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This poster symbolizes the grip of drugs on modern society. It was displayed at Unesco headquarters in Paris at a conference held last December on education as a means of preventing drug abuse. The poster exhibition was prepared by a group of Swiss organizations engaged in the fight against drugs (for other posters see centre pages).

Photo Unesco - Office de la Jeunesse, Geneva

The great fear of the morning after tomorrow

new humanism. Social stratification will take on new dimensions. The gap between rich and poor will diminish increasingly, only to be recreated between the educated and the uneducated.

Contrary to what is happening today, when millions of workers ensure the well-being of a privileged minority, a minority of the intellectually elite will be constantly pushed to the limits of physical and mental effort to provide luxurious leisure for a majority with thousands of millions of docile technological slaves at its beck and call.

All these problems are likely to be particularly acute in the case of the young, say the futurologists Herman Kahn and Anthony J. Wiener, in their book "The Year 2000".

Similarly, those among the young who have no say in the social system, will feel increasingly alienated by a society which openly disregards what youth consider as minimum standards of social justice (requirements which appear Utopian and unattainable to the decision-makers). Ideological movements will thus be born, aimed at providing reasoned and moral justifications for rebellion and for a clean break with outmoded values by young people of all social classes.

Young people who are intellectually less-endowed, but who also rebel will tend to sink into delinquency and crime. Other symptoms of social malaise (mental diseases and neurosis; divorces and suicides, for example) are also likely to increase. The traditional religions may well continue to lose ground or will be reinterpreted, revised and secularised so as to offer less of an obstacle to generally accepted behaviour.

In political terms, such pessimistic perspectives will lead many persons to cling to the past, to denounce moral decay, to reaffirm traditional values and, as a last resort, to demand strict enforcement of order, thus creating an increasing threat to democracy.

Many persons react in this way to the problem of drugs.

That is why I feel it is imperative to spotlight the causes of our great fear of the future and to replace them with the hope of a happy society based on a wider participation at all levels.

Man no longer lives in nature as such, he lives in a nature he has imposed upon himself. He is no longer a simple, natural being; he is now shaped by his own handiwork. He will soon be living in a world, in an increasingly artificial environment where even his gestures will be artificial.

In this context, the French sociologist Jean Fourastié asks: "How can human thought, moulded during thousands of years by the slow and regular rhythm of the climate, the seasons, sun and rain, wind and frost, be expected to respond to the sudden intrusion of the rapid, staccato, perpetually repeated rhythms imposed by the demands and the use of machines?

"What will be the implications for man's moral and intellectual equilibrium of the new ways of thinking conditioned by today's technological environment, by the horizon which has dwindled from Virgil's fields to a place on the assembly line, by the sapping of initiative through growing specialization, by the rigid timing imposed by mechanization, and by the passive submission of the mind to the laws of the machine, whether in their discovery, their observance or their application?"

Have we ever found out what young

people think when we talk to them about lifelong education, and tell them: You are being awarded university degrees for knowledge that is out of date so your degrees, too, are obsolete. You will never really "graduate" from university. If you stop studying, you may become a "has-been" at the age of 30.

At forty you will earn your living in occupations that do not even exist today. You will have to change your job several times and your place of work even more often. And you will witness several revolutions in industrial production during your working life.

You will never be able to relax your effort to re-adapt and retrain for new jobs, no matter how difficult and exacting you find it. And you will spend most of your "leisure" time doing just that. Anyone who stays put, who passively follows a routine at work will be eliminated.

More than any previous generation, young people today therefore need an education that develops solid character and sound reasoning. Yet what is happening in reality?

A recent inquiry undertaken by the Académie de Toulouse, in France, shows that young people spend 200 hours more in front of the TV screen than they do listening to their teachers. And as we know, from the mass of information he gulps down indiscriminately, the reader or viewer retains only what has been dramatized.

Moreover the mass media stifle information by the very mass of information they pour out. They can produce an "industrial conditioning" of the mind. They result in superficial knowledge that leads to woolly ideas about doctrinal systems and thus to the discrediting of authority (family, school, political party, trade union or church).

The media artificially nurture subcultures—"ghettoes" in which the young are isolated—and they strengthen the hold of certain industries on the "youth market," thus promoting the commercial exploitation of the young.

When it comes to the problem of drugs, rather than explain its real roots which might call an existing system in question, the press either focuses on irrelevancies or partial solutions or highlights only one aspect, leaving the real problem in the dark, at the risk of inventing spurious problems that mislead both young people and adults.

● The mass media carry advertizing for alcohol, tobacco and medicines, in other words for legalized drugs. The press therefore refers only to certain drugs in disparaging terms. "Drugs", as seen by the press are limited to those banned by law, with the exception of a few pharmaceutical products which it puts in the same bracket.

● Since such drugs are illegal, they must be combatted with the power and the arms of the law; police and court action is then reported in sensational terms.

● Once the forces of law and order come into the picture the situation escalates. Things have "gone too far". The drugs problem becomes an obsession among adults, parents in particular, whilst the young grow more and more angry and embittered. This drug psychosis and the atmosphere of fear and tragedy are aggravated by blaring headlines.

● As drugs which are legal and also profitable for society are deliberately sidestepped, the young are thus, if not the most numerous and serious addicts, at least the ones on whom the glare of publicity is turned. This "youth-drugs" association is used and abused by the press.

The articles published in the press (on youth and drugs), their titles (youth and drugs) and the photographs that illustrate them (youth and drugs) create a current of public opinion which influences both parents and children.

The press thus presents a one-sided picture by restricting the meaning of the word "drugs" and by relating it solely to youth, whereas it is adults who are most affected by drug addiction. Supporting a system which itself endangers a large part of the population, the press camouflages the commercial reasons, which are the real causes for the phenomenon, by advancing secondary causes as basic ones: "To escape from family problems"; "Lack of vocational training"; "The urge to 'opt out' of society"; "The generation gap"; "Drug-takers *want* to be addicts".

Sometimes the press publishes totally false information: "Most heroin addicts are aged between fifteen and twenty-one", it tells us.

It quotes non-existent "statistics" which nevertheless impress the reader: "Out of 93 people sentenced for peddling or taking drugs, 48 were under the age of 25". As the young are constantly under police surveillance, and are more vulnerable than adults when they are up against the law, it follows that they are the more frequently arrested and sentenced.

In other words, by publishing incomplete, edited and often untrue information, the press creates an unmistakable trend of opinion. In this way, it evades the deep-rooted, material causes of the problem and thus does nothing to eliminate it.

Since all these reasons are economic, the press, in fact, is looking after its own interests, under a system on which it depends and which it defends.

■■

HOW can the press incite or discourage drug-taking by young people?

By treating "youth" as a social group it isolates and differentiates young people from others, thus generating antagonism between this group and others ("zenophobia" between social groups is an established fact in western society). In isolating the group it isolates each member of the group from other social groups. It makes each young person feel a need to identify with and join others of his own age.

By directly associating the words "youth" and "drugs" the press incites young people to take drugs since they feel that only in this way will they be accepted by the social group into which the mass media have put them.

A young person who reacts *actively* against the society in which he lives (unlike an adult who reacts passively), needs to find a social identity. By the trend of opinion that it has created, the press forces on him not only the "youth" concept but the combined concept of "youth-drugs".

Moreover, by evading the basic issues of drug abuse it perpetuates in young people the feelings of anxiety, insecurity and incoherence created by the social system in which they live.

It also perpetuates the desire for escape, oblivion and evasion which finds expression in drug-taking.

The kind of press I have described conditions people deliberately to turn a blind eye to certain problems, and prevents real answers and remedies from being found. Instead, the problems are aggravated and multiplied to the point where escape—to the world of drugs—becomes the only immediate evasion for adults and for the young.

Let me give an example quoted by Dr. André Boudreau, Director-General of the Office for the Prevention of Alcoholism and Other Addictions, in Canada. "In Quebec," he said, "over a third of young people questioned during an inquiry into the drug problem said that they had first tried drugs as a result of television programmes in which 'stars' had talked about drug-taking ...". Advertizing,

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A way of life and not just a standard of living

the star-cult and news—a combination which leads nowhere, if not to drugs.

Where young victims of drugs are concerned I consider police repression and psychiatric treatment an admission of failure and an acceptance of a tragic situation. The fear of syphilis rarely stopped our grandfathers from indulging in amatory adventures, nor has the fear of hell stopped people having sins to confess. A different approach is therefore needed.

Let us be clear about one thing. There is no "youth problem"; there are only youth aspects of society's global problems. The young recognize no statutory restraint that compels them to put up with our inhuman society, unlike their elders who are obliged by social position or profession to follow well-trodden paths signposted by respectability or other obligations.

I sometimes wonder whether the blind rage felt by some adults towards the young is not mere resentment because, for reasons of social status, they themselves dare not indulge in certain freedoms (sexual freedoms, for example) which are common practice among the young.

You may tell me that there is a silent majority among youth—among adults, too. The silent majority is resigned to its fate—that of being preyed upon.

But there is a minority that accuses, dissents and rejects. It has no need of drugs because its life is full and boredom is unknown; its stimulant is hope and it sets new values or infuses fresh life into old ones.

There is another, larger minority that works in the youth sections of the important philosophical, religious and political movements. They do not take drugs either because their participation in campaigns for reform and education occupies their lives and inspires their will to succeed.

The same is true of those sportsmen who have not "gone professional," who have kept clear of the commercial side of sport.

Finally there is the minority that "opts out"; the minority that concerns us here.

I can already draw one global conclusion, namely that a problem created by a state of crisis in society can be solved only by a new policy, affecting the whole of that society, its organization, its aims and its system of values.

In a society aimed at promoting man's development and not merely the management of production and consumption, a society that deserves affection and offers security, there will be no agonizing drug problem because there will be no urge or reason to escape from society.

In other words, the problem I am posing concerns the quality of life, and I say that the destiny of man is to *be* more—not to *have* more; to have a way of life, not just a standard of living, even if this means struggling against the current of impersonal forces and endeavouring to change, by human willpower and determination, what some would have me believe is the course of history.

● We should begin by changing education so that as early as possible a young person becomes an independent, mentally mature adult, responsible for himself and for the various communities in whose life he shares: his family, his district, his town or country, and finally the world. Trained to be both independent and responsible, he will not be caught off-balance by the suggestions of a friend or drug-pedlar, and the idea of having to do the same as others will not even cross his mind.

● From his earliest days, a child must become accustomed to choosing, in the cultural and every other field, from the vast and indiscriminate flood of things with which we are being swamped.

● From the start we must stimulate a child's ability not only to assimilate knowledge, but also to reason clearly and selectively, to establish priorities and values, so that the deluge of information and suggestion can be digested and controlled.

● From early childhood, attitudes (and aptitudes) that make for creativeness must be developed so that each individual can find in self-expression constant sources of happiness and satisfaction, and thus escape the boredom of commercialized leisure.

All this should lead to a new and active form of culture that gives a more personal dimension to life.

And this gives a new dimension and urgency to the working out of a leisure policy, systematically organized, properly financed and offering the right incentives. It would cost far less to do this than to enlarge our prisons and psychiatric hospitals. It would also be more effective in the sense that an ounce of prevention is worth a ton of cure. ■

Drawings © François Koffler, Paris

THE DON'TS OF DRUG EDUCATION

Continued from page 11

preliminary. On no account should we uncritically accept the notion that all drugs education is good, and push our teachers into an ill-considered campaign that might well turn out to be an abuse of education itself. On the other hand, we must not continue to miss the opportunity to put education to use.

We have already seen that the case for drugs education cannot be based on statistical evidence of its value or effects. If we wait for such evidence before taking action—always a plausible rationalization for official inertia—we may wait indefinitely and in vain.

The constantly changing pattern of drug abuse and the difficulty of collecting reliable data may prove to be insuperable obstacles. So the case must be made out on other grounds. The most obvious is the general proposition that well-informed teenagers would be better equipped to take rational decisions about drugs.

This sounds reasonable enough to anxious parents. The snag is that it is not anxious parents we have to convince but their teenage children—whose behaviour may be governed more by fashion, instinct and emotion than by reason. Somehow we have to appeal to their hearts as well as to their heads.

But this may be no simple matter: what looks like a problem to us looks much less like one to many teenagers. Like the promiscuous teenage girl who denied any sex problems—"I just do what I like, so where's the problem?"—they cannot see what all the fuss is about. Drug-taking, they claim, is a private affair which does not harm others and should not concern society.

Somehow we have to convince the minority of potential drug-takers and their sympathisers that there is a good case for intervening to prevent (or treat) what many of them see as a private, self-regarding action. Unless we are clear about this in our own minds, we shall never convince a generation of teenagers successfully taught to think for themselves. After all, it is questionable whether we, with our cigarettes and alcohol, our tranquillizers and sleeping tablets, are in a position to point the finger at "them" at all.

The basic contention that habit-forming drugs are too dangerous even for adults to make up their own minds about is reinforced by the fact that even in Britain's new Misuse of Drugs Act, for instance, there is no special protection for minors. Yet the young are specifically at risk. We fail them criminally if we provide neither the protection to which they are entitled, nor the necessary guidance on which to base a decision that drugs are not worthwhile.

So the case for education can be based, first, on long-established principles with which few teenagers would argue—though there might well be some disagreement about the age at which they should be allowed to start taking their own decisions. It can also be based on certain features of adolescent drug-taking itself: its tendency to spread not unlike an infection among susceptible teenagers, chronically infecting some, injuring others physically or mentally.

The point I would make is simply that teenagers—even pro-drugs teenagers—are hardly less concerned about them than their anxious parents. Indeed, those teenagers least concerned about drug-taking as such may be among the most concerned about its ill-effects, for they are more likely to have seen them.

In other words, it is the people that matter to them, not the drugs; perhaps this is as it should be. And in a wider field these same teenagers are often among the most deeply concerned about the sort of society in which youthful and adult drug-taking has become so widespread. It is here that the adult world should be able to reach the heart as well as the head of teenage opinion.

For all these reasons I try when talking to adolescents about drugs to enlist their interest in drug-taking as a serious social problem, and discuss with them why they think it has come about and what should be done about it.

In my experience, the best technique in schools is to divide a class of anything between twenty and fifty into three or four discussion groups, each with a leader and a reporter (who records their main conclusions only). Each group discusses a specific topic, such as: Why a specifically teenage drugs epidemic and why now? Why are so many adults dependent on cigarettes, alcohol, tranquillizers, sleeping tablets, stimulants, even gambling and TV? What should we be doing about it?

CONTINUED NEXT PAGE

Eight pitfalls to be avoided

Such groups, especially those discussing parental weaknesses, need little encouragement to discuss actively for half an hour or more. Few are bored, as happens so easily when a lecture on drugs is given to a large class, which is usually divided into those who think they know it all already and those who aren't interested anyway. After the separate discussion groups, the whole class comes together for general discussion, which must be handled by a well-informed person, preferably a teacher at the school in question.

THIS method seems to me to have several advantages.

First, it can be an interesting, lively and relevant experience for both teacher and taught; both have much to learn from each other, and the "unmentionable" subject of drugs suddenly becomes freely discussed.

Second, discussion is automatically pitched at the right age and intelligence levels for the pupils, who may be anything from ten to eighteen, of high or low intelligence.

Third, the young are pushed into making up their own minds about drugs, something that many of them will sooner or later have to do for themselves. After all, it is they, not us, who are likely to be offered marijuana, and it is they who will have to learn to live with the stronger drugs of the future.

Fourth, there is little difficulty in reaching broad agreement on the serious aspects of drug abuse—overdosage, inability to work, physical and mental disorders, accidents, involvement with crime, the dangers of addiction, driving under the influence, corrupting children with drugs and so on.

The class can then draw a line between use and abuse—medical or social, differing from country to country—and I find that my line is in almost the same position as that of the great majority of teenagers. Even if we disagree about pot, this tends to fade into insignificance if we agree about almost everything else.

In these ways one can avoid the two great dangers of drugs education: the giving of sets of instructions in a way that positively invites experimentation; and the creation of a generation gap between a representative of the "anti-drugs" adult world and "pro-drugs" teenagers.

For the latter purpose it is essential that we educate parents and teachers in the same way. In my experience, the majority of teenagers are by no means uncritically pro-drugs, unless we make the mistake of pushing them into that defiant posture. It is an easy mistake to make. But it is equally easy, on the lines I have tried to outline, to reach their idealism and their concern for others.

At worst, I believe that this approach can do no harm, but there are a number of pitfalls to be avoided.

1. In particular, I believe that we should not use films or TV in schools, since these are emotive media likely to play on a teenager's emotional instability, unless they are accompanied by well-informed discussion.

2. It is very unwise to put on star-turns by outsiders, which may generate excessive curiosity and interest.

3. Do not say "don't" in an authoritarian fashion, for teenagers are naturally rebellious, and your prohibitions may act as a dare.

4. Do not stress the dangers of drugs, because taking risks is normal among adolescents. In any case, they will feel that the dangers "can't happen to me".

5. Do not give adolescents sets of factual instructions about drugs, their uses, effects, sizes, colours, which invite experimentation.

6. Do not let ex-addicts tell teenagers about their experiences, because this may attract more than it deters. It may also misleadingly suggest that they too could always kick the habit should they get hooked.

7. Do not give a highly complex recital of facts about drugs and their abuse and then leave teenagers to make up their own minds. The available data would need a computer to sort out, even if all the "facts" were true.

8. And finally, do not make the addict's mistake of elevating drugs to a position of supreme importance; it is surely better to play them down as a very poor substitute for active involvement in real life.

However well it may be conducted, and this article only sets out one possible approach, we should not expect too much from drugs education in schools. It can never be more than a major part of a broader campaign of public education. And that in its turn is but one among the whole range of measures required to combat drug abuse.

However, it may be that just as it has greater potential for harm, education has greater potential for good than other forms of expert intervention, if we conceive its role broadly enough. This means, in my view, concentrating more on people and the sort of society they live in than on drugs.

The pattern of adolescent abuse in many countries suggests that it is most widespread, not so much where drugs are freely available, as where community bonds and the transferring of social norms and values to the next generation has been most weakened by social change.

A striking feature of any stable, self-respecting community is the transmission of its way of life to its children. If, as I suspect, some kind of breakdown in this process underlies both the youthful demand for drugs and society's inability to handle the resulting problems, then the responsibility is primarily a community one.

We cannot push it off—in the current vogue—on to the experts, though we undoubtedly need their specialist help. It is the responsibility of all of us not only to convince teenagers that life has better things to offer than drugs but to ensure that it has.

The teaching profession can be of more help here than all the other experts put together. Unlike the law enforcement agencies, the psychiatrists and the research workers, teachers can help us to give adolescents a social role, to involve them in a society that needs their positive qualities—but not their drug-taking.

George Birdwood

BOOKSHELF

RECENT UNESCO BOOKS

■ **Cultural Policy in Iran,** by Djamchid Behnam. 1973, illustrated, 46 pp. (60p, $2).

■ **Cultural Policy in Sri Lanka,** by H.H. Bandara. 1972, illustrated, 70 pp. (60p, $2).

■ **Museums, Imagination and Education** (No. XV Museums and monuments series). 1973, illustrated, 148 pp. (£2, $6). **See inside back cover.**

■ **Innovation in Reading in Britain,** by Hugh Philp and Judith Goyen. Unesco-IBE, 1973 (Experiments and innovations in education No. 3), 36 pp. (35p, $1).

■ **Understanding Change in Education: an Introduction,** by A.M. Huberman. Unesco-IBE, 1973 (Experiments and innovations in education No. 4), 99 pp. (65p, $2).

■ **World Problems in the Classroom,** A teacher's guide to some United Nations tasks, by Herbert J. Abraham. 1973, illustrated, 223 pp. (£1.20, $4).

■ **Geothermal Energy,** Review of research and development, edited by H. Christopher Armstead. (Earth sciences series No. 12), 1973, 186 pp. (£4.65, $14).

■ **Cinematographic Institutions,** A report prepared by the International Film and Television Council (IFTC). (Reports and papers on mass communication No. 68), 1973, 98 pp. (65p, $2).

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OTHER BOOKS

■ **Ecological Morality,** by Bruce Allsopp. Frederick Muller Ltd., London, 1972, 117 pp. (£1.80).

■ **Man and the Social Sciences,** Edited by William Robson. 12 lectures given at the London School of Economics on development of the social sciences during this century. LSE-George Allen and Unwin Ltd., London, 1972, 284 pp. (hardback £5, paperback £1).

■ **The Conquest of Deafness,** by Ruth E. Bender. Case Western Reserve University Press, 1970 (revised edition), 243 pp. ($7.50).

■ **The Work of the Science Film Maker,** by Alex Strasser. Focal Press Ltd., London, 1972, 308 pp. (£4).

■ **The Water is Wide,** by Pat Conroy, Houghton Mifflin Company, Boston, 1972, 306 pp. ($6.95).

■ **The Vortex Theory of Planetary Motions,** by E.J. Aiton. Macdonald, London and American Elsevier Inc., New York, 1972.

UNESCO NEWSROOM

'Development Forum' new U.N. newspaper

"Development Forum" is a new monthly newspaper published by the United Nations Centre for Economic and Social Information (C.E.S.I.). Its aim is to stimulate the support of world public opinion against the threats that are posed to our survival by wasteful expenditures on armaments, inequitable distribution of resources, growth of population and deterioration of the environment. For a complimentary subscription to "Development Forum", apply to: C.E.S.I., P3/16, Room C525, Palais des Nations, 1211 Geneva, Switzerland.

Women's jobs & education

Unesco and the International Labour Office are making an international survey of the relationship between women's opportunities for study and employment. The project aims to assist countries in drawing up national policies that offer women equal chances in education and professional training. Studies cover five countries: two in Africa and one each in Latin America, the Arab States and Asia.

10 million British books for developing countries

Over 10 million books have been made available to developing countries under the English Language Book Society Low-Priced Book Scheme in the U.K. Subsidized by the British Government, the scheme enables books to be sold in 57 developing countries in Asia, Africa and the Pacific region at between a third and a half of the normal commercial price in Britain. Over 450 titles are currently available in a wide range of subjects, including engineering, agriculture, medicine, commerce, technology, education and English language teaching. The ten millionth book to be produced was recently handed over to Kenya's Minister for Education, Mr. Taita arap Towett, in Nairobi.

Van Gogh museum for Amsterdam

Works by Vincent van Gogh will have a permanent home in a new museum to be opened in Amsterdam next month by Queen Juliana of the Netherlands. The Vincent van Gogh Museum will house the collection of Dr. V.W. van Gogh, the artist's nephew, which includes 230 paintings, 400 drawings and van Gogh's letters to his brother Theo.

Sandor Petöfi Hungary's poet-patriot

This year marks the 150th anniversary of the birth of Sandor Petöfi, one of Hungary's greatest poets and patriots. Petöfi's poetry, characterized by realism, humour and descriptive power, brought new vitality to Hungarian literature, and one of his poems "Talpra Magyar" (Rise Hungarian) written on the eve of the Hungarian revolution of 1848, became the revolutionary anthem.

Mali awards its first doctorates

Mali's higher educational system, established with help from Unesco and the U.N. Development Programme, "came of age" recently when the first Malians to earn advanced degrees entirely through studies in their own country were awarded doctorates from the Centre of Higher Studies in Bamako. Mali now has an Ecole Normale Supérieure, which trains secondary school teachers, a Rural Polytechnic Institute, a National School of Administration and schools of engineering, medicine, pharmacy and dentistry. At the Centre for Higher Studies students can take advanced courses in geometry, mathematics, physics, soil microbiology and animal physiology.

U.N. nature park in Antarctica ?

Ecology-minded officials around the globe are examining an appeal by representatives of 75 countries for the creation of the first world natural park—in Antarctica. The park would be managed by the United Nations and would protect the fauna and flora of the southern arctic region, especially from depredations by hunters, if action is taken on the unanimous recommendation of last year's Second World Conference on National Parks, sponsored by the International Union for the Conservation of Nature and Natural Resources.

Electronic device aids Arabic typists

An electronic device which greatly simplifies typing and printing in Arabic script has been developed by Dr. Syed Hyder, associate professor in the Department of Computer Science, University of Montreal, Canada. A serious difficulty in reproducing Arabic script on keyboard machines is that a letter may have several different shapes depending on what comes before and after it in a word. Dr. Hyder's electronic processor device recognizes successions of Arabic characters and chooses the appropriate shape. The operator then needs only one key for each letter as on a Western keyboard.

Flashes

■ *World population reached 3,706 million in mid-1971—at a 2 per cent annual growth rate and an increase of 74 million in one year, reports the latest U.N. Demographic Yearbook. At this rate, world population will double by the year 2006.*

■ *Malaysia is spending 843 million Malaysian dollars on education this year—163 million dollars more than on defence.*

■ *Soviet archaeologists have discovered the remains of a 2,500 year old town in the Central Asian Soviet Republic of Tadzhikistan.*

■ *During the first U.N. Development Decade (the 1960s) industrial production rose by an annual average of 10.7 per cent in countries belonging to the U.N. Economic Commission for Asia and the Far East.*

■ *A decade of struggle against racism and racial discrimination is to be launched by the U.N. General Assembly on December 10, 1973, the 25th anniversary of the Universal Declaration of Human Rights.*

Letters to the Editor

SRI AUROBINDO AND AUROVILLE

Sir,

Allow me to congratulate you on your excellent issue featuring articles on Sri Aurobindo and Auroville (October 1972). What particularly pleased me was your choice of my old teacher, Professor K. R. Srinivasa Iyengar, for the Aurobindo article. Professor Iyengar's knowledge of Aurobindo's life and work is not merely academic; it is a result of personal practice and experience. And Aurobindo's work itself, whether it is poetry or philosophy (most of the time the former is a vehicle for the latter), is the result of his lifelong meditation and personal realization.

Like another Bengali mystic before him, Ramakrishna Paramahamsa, though on a somewhat different plane, Aurobindo was intensely concerned with the destiny of man and believed that, if he tried hard, man could transcend the limitations that make him earthbound. He believed, too, that the logical end of man's evolution is his merger with the divine.

M. I. Sastri
California State College
Bakersfield, U.S.A.

THE RIGHT IMAGE ?

Sir,

Do you really feel that the drawings relating to European countries ("A Hungarian artist looks at International Book Year") in your October 1972 issue are tasteful and appropriate?

Linda Spacek-Jung
New York, U.S.A.

LIMITS TO THE LIMITS TO GROWTH — A CLUB OF ROME REPLY

Sir,

At the suggestion of Mr. Aurelio Peccei, president of the Club of Rome, I should like to comment on the article "Limits to the Limits to Growth" by Gunnar Myrdal in your January 1973 issue.

In the final analysis there is little contradiction between Mr. Myrdal's basic views and those of the Club of Rome executive or even of the "Limits" report itself.

1. The Gross National Product concept is by no means uncritically accepted in "Limits". As Mr. Peccei and I stated in "The Limits to Growth in Perspective" (a paper submitted at the request of the Economic Committee of the Parliamentary Assembly of the Council of Europe, in December 1972):

"If the book on the limits to growth is read carefully and with an open mind, it becomes clear that, despite the terms of the title, it is not growth as such which is at fault but the present kind of growth and our methods of measuring growth."

It is also no coincidence that the first politician to formulate practical proposals based on "Limits", Mr. Sicco Mansholt former president of the Commission of the European Community, opposed the concept of Gross National Utility (GNU) to the Gross National Product (GNP) concept. Unfortunately up to now no statistical data on GNU is available as a basis for a systematic study such as that performed by the MIT team.

2. The high degree of aggregation and the preliminary nature of some of the data used (in order not to wait another 5 or 10 years) is a criticism often expressed. To repeat this opinion the way Mr. Myrdal does is surely below his standards. Would it have been reasonable to expect the Wright brothers to fly a Jumbo Jet?

3. The fact that "inequalities of distribution are defined as social problems" and placed outside the first model simulation cannot really be construed as neglect. It was a simplification, necessary at that stage and showing that even under idealized assumptions present ecological trends are disastrous.

4. Social interactions and institutional responses, it is true, are to be (and are being) much more deeply studied than two years ago, not least because of "Limits" having empirically demonstrated the inadequate and too slow functioning of traditional political and economical "mechanisms".

5. To qualify the interrelationship concerning birth rates, used in the model, as "fictitious" is a dogmatic statement that goes against statistical evidence. Surely, however, the issue is much more complex than the simulation could handle; many of the quantitatively still intractable and irrational factors are acknowledged in "Limits".

6. Mr. Myrdal's feeling that "those conclusions from the report's analysis which are sensible at all, are not different and definitely not more certain than could have been reached by... hard simple thinking aware of the limitations of what we know", is to my mind erroneous.

As we pointed out in "The Limits to Growth in Perspective":

"For the first time an instrument has been demonstrated which is to some extent in keeping with the complexity of our world and its problematique. Never again will it be possible to regard population, monetary matters, industrial growth and many other problems as autonomous areas of policy determination.

"The fallacy has been shown of the theory that the overall goals of a social system are best approached by working separately towards each subgoal. On the contrary, in our present condition every effort to enhance one sub-goal reduces the chances of meeting other sub-goals. The problem is to determine the optimum compromise, not only at a national but also at a global level."

I should like to comment also on another article in your issue: "Environment and Political Commitment", its subject being of similar nature. The young scientists' round table meeting at Unesco was a most constructive event, and its conclusions, among others, were summarized in the annex of the above-mentioned paper. Two sentences of this summary may be quoted:

"The MIT study is somewhat criticized for not having dealt with the waste of armaments and for placing too much emphasis on resource limitations rather than stating that the real root of most ills is a crisis of civilization: a single deep-lying problem with many diverse symptoms. This coincides with the Club of Rome thinking."

As to the "a-political stance" of "Limits", reproached by the young scientists: measured by the impact on public opinion and all strata of people and by the stirring-up of politicians of all shades, "Limits" has proved to be eminently political in the best sense of the word.

One aspect of its importance, to again quote "The Limits of Growth in Perspective", lies in fighting against:

"...the deep-rooted tendency... of focusing on symptoms and consequences (inequalities, world-war threat) instead of referring to the underlying causes. It is the very nature of the predicament that its problems are so critically intertwined that it is not possible to deal with any single major issue separately and in isolation. The habitual kind of linear, sequential thinking ('disarmament first' or 'economic growth first') is basically wrong, and cannot lead us out of the present colossal impasse. Just imagine waiting for the world to be de-nuclearized before attacking the problems of poverty, or vice versa. Nothing has such priority as to relegate the problematique as a whole to second place. All the issues have to be dealt with, or a least understood, in a coherent, systemic way."

With my compliments on the choice of the subject and the presentation of your January 1973 issue.

Manfred Siebker
Brussels, Belgium

BUT THEY DO !

Sir,

"Americans read more books than Europeans" reports your February 1973 issue. My wife and I cannot understand how they do so. Surely this is another fallacy.

J.P. Rees
Margate, South Africa

ART OF THE OUTLINE

Sir,

In publishing the beautiful shadow portrait cut outs of Ugo Mochi, your January 1973 issue drew attention to an art form which interests me very much and which I practise.

I belong to the "Compagnons de Lure", a group of specialists in the graphic arts. Its annual meetings, the "Rencontres Internationales de Lurs", are presided over by Gérard Blanchard, author of the article "An ABC of Text Plus Image" in your December 1972 issue.

Your world-wide readership could, I am sure, provide a wealth of fascinating information on this very popular art form. Collectors, practitioners and lovers of the art could surely compile a bibliography, collect reproductions and publicize this modest yet very satisfying form of artistic expression.

J. Grégoire
84580 Oppède, France

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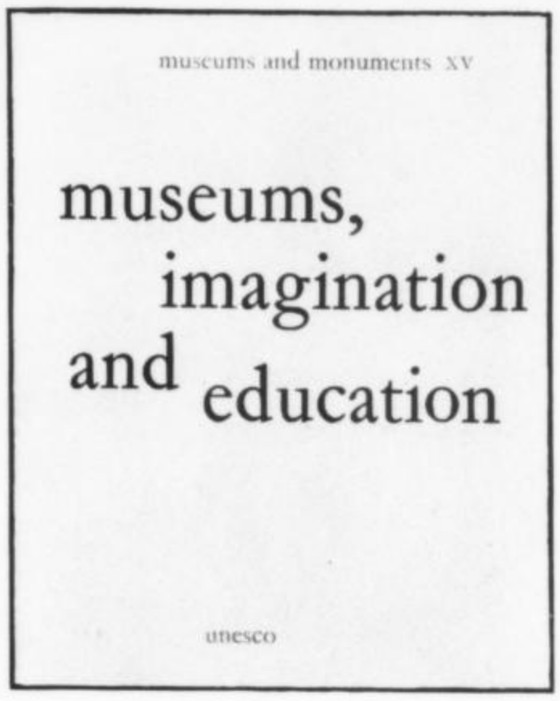

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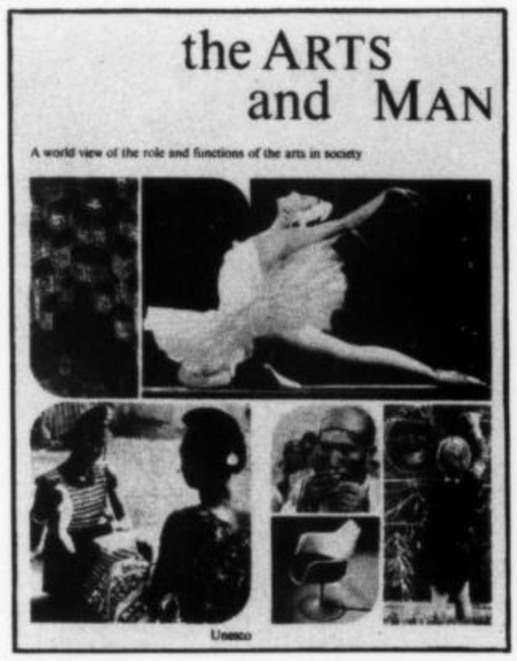

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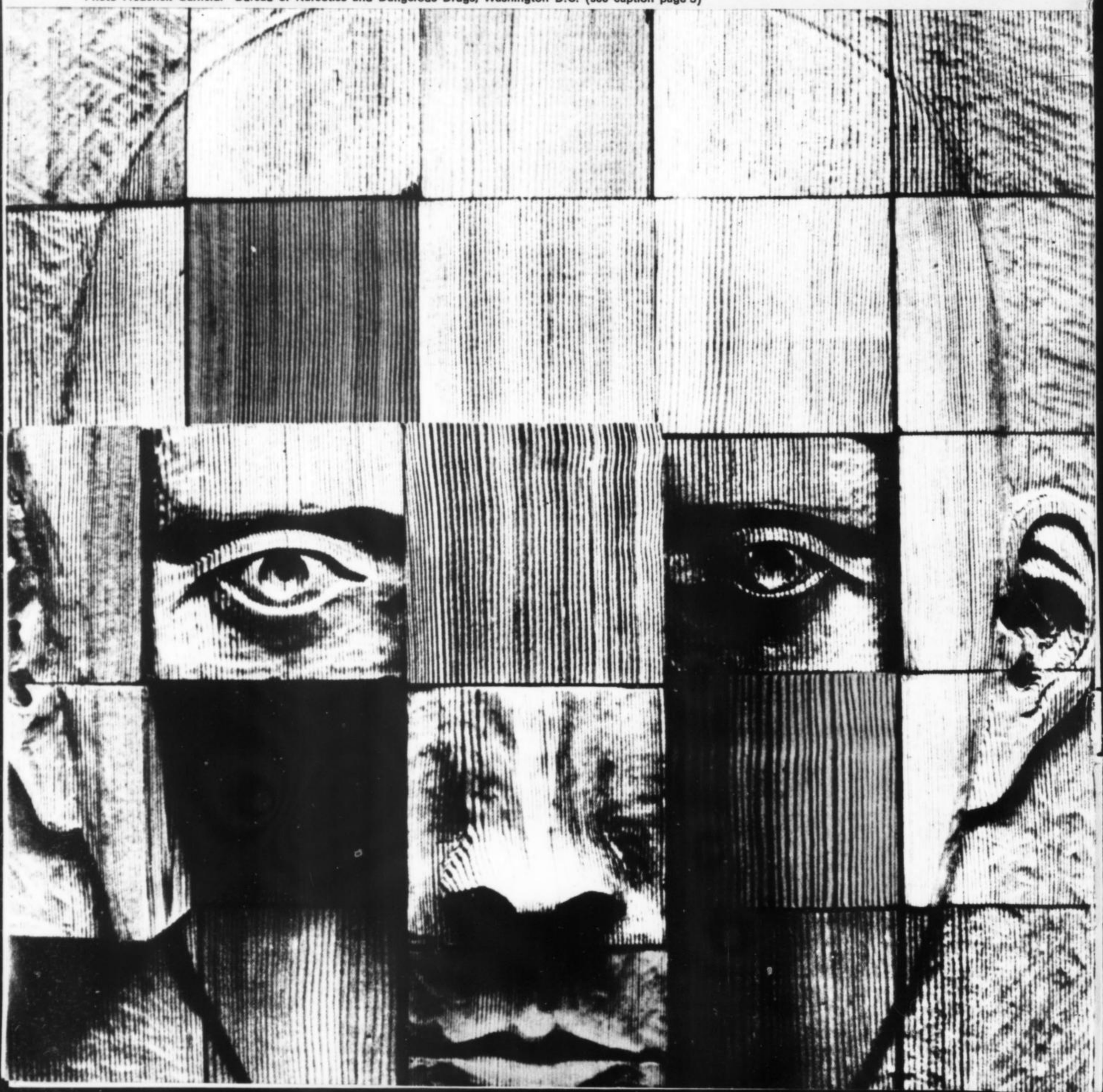
"Unesco neither looks upon drugs as a specific problem of youth, nor does it consider that the many serious problems facing youth in the world today all bear a direct relation to drug-taking as such. The use of educational techniques as a weapon against drugs should therefore be aimed at both young people and adults."

Amadou-Mahtar M'Bow
Unesco Assistant Director-General
for Education

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